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ANTECEDENT FACTORS ASSOCIATED WITH LATE BIRTHTIMING  
DECISIONS OF DUAL-CAREER COUPLES

*The University of North Carolina at Greensboro*

PH.D. 1985

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ANTECEDENT FACTORS ASSOCIATED WITH LATE BIRTHTIMING  
DECISIONS OF DUAL-CAREER COUPLES

by

N. Maxine Soloway

A Dissertation Submitted to  
the Faculty of the Graduate School at  
The University of North Carolina at Greensboro  
in Partial Fulfillment  
of the Requirements for the Degree  
Doctor of Philosophy

Greensboro  
1985

Approved by

  
Dissertation Adviser

APPROVAL PAGE

This dissertation has been approved by the following committee of the Faculty of the Graduate School at The University of North Carolina at Greensboro.

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SOLOWAY, N. MAXINE, Ph.D. Antecedent Factors Associated with Late Birthtiming Decisions of Dual-Career Couples. (1985) Directed by Dr. Rebecca M. Smith. 145 pp.

The birth rate is up sharply among women 30 years old and older. Many are choosing to pursue and establish careers in early adulthood and electing to delay childbirth until their later reproductive years. The purpose of this study was to identify the salient factors associated with the decision of dual-career couples to become parents after postponing childbearing.

These 30 career men and women (15 dual career couples) selected for the study had pursued active careers prior to the birth of their child and had postponed childbearing at least two years after marriage. Subjects were a well-educated, professional group with a median duration of six years of marriage. The mean age of the dual career-mothers at first birth was 33.2 years.

A qualitative research methodology involving intensive interviewing and analytic induction was utilized for collecting and analyzing the data. The outcome was a modified model of late birthtiming that illustrated the need for there to be (a) pressure from the wife's biological time clock; (b) financial security; (c) completion of training, education, or establishment in one's career; (d) establishment of an occupational identity; (e) a stable marriage; and (f) resolution of individuation and sex-role identity issues before (g) fulfillment of or resolution of family



injunctions related to birthtiming. A salient factor delaying the decision appeared to be the strong necessity to establish oneself as separate from one's family of origin thus being able to identify with the parenting role.

Both the influence of birthtiming of their age group and continued existence of societal norms prescribing parenthood seemed to influence the couples' decision making. Some empirical support for a parental norm was that dual career couples scored less modern on a sex role preference scale than would have been expected. In some cases, a discrepancy existed between the objective scores from the sex role preference scale and the actual behavior and attitudes expressed during the unstructured interviews.

Recommendations for further research include using a sample of dual earner rather than dual career couples through a similar qualitative methodology. Also the degree of salience of each variable should be studied.

## ACKNOWLEDGMENTS

I wish to express my appreciation to my Committee Chairperson and Adviser, Dr. Rebecca M. Smith, Professor of Child Development and Family Relations, for her expert guidance, support and encouragement. I wish also to thank the other members of my Committee for their interest and suggestions: Dr. Virginia Hargett, Associate Professor of Nursing; Dr. Mildred Johnson, Professor of Home Economics Education and Business; and Dr. Sarah Shoffner, Assistant Professor of Child Development and Family Relations.

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## CHAPTER I

### INTRODUCTION AND REVIEW OF LITERATURE

The study of dual-career couples has been present in the family literature since the late sixties (Rapoport & Rapoport, 1971, 1980; Epstein, 1971; Holmstrom, 1972; Paloma, 1972). These studies provided a comprehensive description of how educational, economic, and social-psychological factors combined to motivate women toward and to constrain women from participation in the occupational world in ways commensurate with their abilities.

Some researchers were also concerned with consequences of the family patterns of these couples (Rosen, Jaree & Prestwicks, 1975; Handy, 1978). Dual-career couples are defined as a type of family structure in which the heads of households, both husband and wife, actively pursue careers. Careers are characterized by job sequences that require a high degree of commitment and that have a continuous developmental character with the opportunity for personal development and advances in pay or status.

At the present time increasing attention is being focussed on dual-career couples who are having their first child at a "later age." The birth rate is up sharply among women 30 years old and older as many are choosing to pursue and establish careers in early adulthood and electing to



delay childbirth until their later reproductive years (U.S. Census Bureau, 1982). The childbearing decisions of these dual-career couples have considerable social, economic, and health significance and possible consequences.

Yet little is known about the factors influencing these dual-career couples' decisions to become midlife progenitors and the consequences of these decisions for themselves, their families, and society. This exploratory study is concerned with identifying the salient factors associated with the decision of dual-career couples to become parents after postponing childbearing until the wife is 30 years old or older.

#### Changing Roles of Women

The structural definition of marriage cites procreation and socialization of the next generation as a major function and goal (Pitts, 1964). Within that framework, becoming a mother was identified as the most salient female role.

Beginning in the 1960's and continuing through the decade, the thrust of the feminist movement in America demanded equal rights, jobs, and education for women. Feminists wanted a self which was defined on a male basis delineated by separation and an achievement orientation as opposed to a self which was defined on a female basis by relationships and activities of caretaking (Gilligan, 1982). At the same time, the changing values of the fertility control revolution legitimized and began to make possible

the realization of equal opportunities between the sexes because nonfamilial alternative roles had become a realistic option for women (Poston & Gotard, 1977).

Technical improvements in contraceptives and their social acceptance made not bearing a child a choice rather than having children an inevitability. Among the generation of women in their twenties during the 1970's, more anticipated spending most of their adult lives in the paid labor force instead of as housewives. Women increasingly enjoyed professional success in the workplace.

When this group of educated professional women married, it was typically to career-oriented spouses with egalitarian views of marriage and parenthood. Many of these career women chose to establish themselves in their careers before they wanted to take time to bear and raise children. This group of dual-career couples is now increasingly choosing to try to become first-time parents after postponing childbearing until the career wife is in her late 20's to early 40's.

#### Patterns of Fertility of Professional Women

Research on fertility has focussed primarily on the courses and consequences of the number of children a woman bears. Less attention has been given to the timing of these births. Almost all the research on birthtiming concerns the effects of early first births. Much less is known about the effects of late first births and late parenthood (Wilkie, 1981).

Patterns of childbearing have changed markedly over the past two decades. The average age at which American women have their first child has risen substantially. This increase is due both to the postponement of marriage and to the lengthening of the interval between marriage and first birth (Pebbley, 1981).

The age of mothers of first births has risen from the median age of 21.8 years in 1960 to 22.5 years in 1978. More striking has been the increase in the proportion of women over 25 years who are bearing their first child (U.S. Bureau of Census, 1979).

Between 1975 and 1978, the increase in the rate of first births to women between the ages of 30-34 years was 34 percent. In the age group 35-39 years, the rate of first births increased 22.2 percent and in the 40-44 years group there was a 4.8 percent increase (U.S. National Center for Health Statistics, 1981a, 1981b).

At present, childbearing is still up sharply among women 30 and older. Although the overall fertility rate of American women dropped slightly from 1980 to 1982, the rate rose most dramatically for women 30 to 34 years. That group averaged 73.5 births per 1,000 women in the preliminary figures for 1982, up from 60 children born to 1,000 women in 1980. The overall fertility rate for American women dropped to 70.5 from 71.1 births per 1,000 women (U.S. Bureau of Census, 1982). Intention to delay childbearing seems to be

the prime reason for a reduction in births among younger groups (Rogers, 1983).

In the past, many medical experts defined the optimal time for a woman to have her first child as 24 to 29 years of age. A woman older than 29 was considered a "late primagravida" and "advanced maternal age" was defined as over 35 years (Norton, 1974 in Weingarten & Daniels, 1982). Today, because of the increasing number of women having first children when they are in their late 30's and early 40's, the definition of "acceptable first-time motherhood" is being revised upward (Weingarten & Daniels, 1982).

This extension of the fertility deadline is related to the convergence of several psychohistorical factors. The medical risk most feared by older women is that of giving birth to a child with an abnormality such as Down's syndrome. The increasingly widespread use of amniocentesis, the prenatal diagnostic technique which enables couples to know whether the fetus has a chromosomal defect, can assuage fear and make it safer for a couple to consider conceiving at midlife (Fuchs, 1980).

#### Relationship of Birthtiming and Education for Women

As more women have adopted modern sex role attitudes toward marriage and the family, they are choosing to develop their identities in expectation of a generativity whose scope extends beyond motherhood. They are completing their education and/or training and establishing themselves in their careers before proceeding with childbearing.

Educational attainment for women is inversely correlated with age at first births (Rindfuss, Bumpass, & St. John, 1980). The number of college-educated women postponing first births until their late 20's and early 30's has been steadily increasing over the past ten years. An analysis of data from the 1979 Current Population Survey supports this association between higher levels of attained education and later childbearing. In 1978, over 82 percent of first births to women with four years of college were at age 25 years or older and 30 percent were at age 30 years or older (U. S. National Center for Health Statistics, 1981; Wilkie, 1981).

For each year of additional education, these young women delayed parenthood on the average of three quarters of a year. Furthermore, the proportion of women who had delayed their first birth to age 30 years and older increased with additional attainment in educational level (Rogers, 1980).

#### Effects of Occupation on Birthtiming

Rogers (1980), in her article on delayed motherhood, found that occupation also exerted an influence among women who had completed at least four years of college. Among 30- to 34-year-old American women, analysis of the survey data documented that career women were more apt to delay motherhood to the age of 30 years and beyond than were noncareer women. More noncareer women (83 percent) had

already had their first child by age 30 years, whereas only 69 percent of the career women had done so.

In the past, women combined work and family roles sequentially. Most women worked prior to their first pregnancy. This pattern is disadvantageous to women in professional and managerial positions (Wolf & Rosenfeld, 1978). By delaying parenthood and establishing their careers first, women can also achieve more flexible hours and have greater income to buy quality day care (Chafetz, 1980). Studies on labor force participation and fertility have not examined whether the present increase in women's employment has affected birthtiming or if birthtiming varies for women with different career opportunities (Wilkie, 1981).

However, Pebley (1981) predicted that changing attitudes toward birthtiming would result in increases in the average age at first birth. The rapid growth in women's employment opportunities and the increased acceptance of working outside the home may have accelerated this trend by making postponement of the first birth past the early 20's more acceptable.

#### Motivational Factors Influencing the Birthtiming Decision

A review of the research in demography and sociology of marriage and the family revealed no research specifically focussed on the factors associated with the decision of dual-career couples, who had previously postponed childbearing, to have a first child when the wife was 30

years old or older. Thirty years was chosen since it is at this age that the birth rate is rising most dramatically, and it was also an age defined by the medical profession as constituting "older motherhood."

Pronatal attitudes and values about children and the parenting experience are considered influential in childbearing decisions. However, solid data documenting these influences are next to nonexistent (Hoffman, 1978). In our society, parenthood identifies a person as truly mature and an acceptable member of the community. It provides one with additional roles and access to certain institutions of adult society. Until recently desire for motherhood has been considered the only normal culmination of the socialization process of girls.

The desire for a close loving relationship has been found to be one of the most frequent reasons given for wanting a child (Beckman, 1978; Fawcett, 1978; Hoffman & Hoffman, 1978; Towner, Beach, Campbell & Martin, 1977). The parent-child relationship has been one in which men as well as women have found it socially acceptable to express warmth and tender feelings. Blake (1979) in a study of American attitudes toward childlessness, found that men viewed childlessness as more disadvantageous than women did.

Historically, children have been seen as a source of support and a way to avoid loneliness in old age (Blake, 1979; Laucks, 1981). The parent-child relationship is the most enduring of familial relationships. Desire for the

stimulation and experience of parenting is also identified as a primary motivation for having a first child (Bram, 1978; Fawcett, 1978).

Fabe and Wikler (1979) explored the parenthood decision-making of career women in their thirties, some considering pregnancy and some having chosen to remain childless. For career women choosing to have a child, issues of concern during their earlier indecision had included the following: (a) questions about whether pregnancy and motherhood would affect the way their professional competence was perceived and evaluated, (b) concern about arranging adequate childcare, (c) worry that having a child would interfere with their marital relationship, and (d) anxiety about the stress level of trying to manage both a child and a career. Childhood experiences seemed to be a potent variable in these women's decision to remain childless. If a woman had experienced an unpleasant childhood, she was more likely to choose permanent childlessness, whereas the woman who had had a happy childhood wished to replicate it.

Weingarten and Daniels (1982) studied birthtiming experiences of 86 couples. Four different family timing scenarios evolved: (a) The "Natural Ideal" couples who felt children were what comes naturally and for whom conception occurred by "letting nature takes its course," (b) "Brief Wait" couples who deferred parenthood for 2-3 years after marriage in order to enjoy each other and to settle down



before taking on family responsibilities, (c) "Programmatic Postponement" couples who put off parenthood until their agendas of personal and professional goals had been accomplished, and (d) "Mixed Script" couples who disagreed about desired family timing. This would suggest that most dual-career couples who had postponed childbearing until the wife was 30 years or older have been "Programmatic Postponers."

#### Theoretical Explanations for Adult Roles

The psychoanalytic explanation of why women want children has been addressed by theoreticians from varying backgrounds. In this theoretical framework, the desire for motherhood included the need for a strong, nonaggressive identification with one's own mother (Deutsch, 1945; Freud, 1905). Erikson (1959, 1963) emphasized the need for a woman to have an essential early experience of nurturance during which basic trust was established in order for her to wish to become a mother herself in adulthood.

Symbolic interaction stresses that individuals gain meaning about the world by interacting with the social and physical environment, which includes family, peers, and social groups. The theory asserts that the self is constructed from diverse "parts" which form discrete identities such as familial identities and occupational identities. These are incorporated into the self in an organized structure (Stryker, 1967). Meaning about the

world and self is developed by perceiving what others perceive of oneself.

Individuals also conceive of themselves in terms of roles. Roles can be defined as "more or less integrated sets of social norms that are distinguishable from other sets of norms that constitute other roles" (Burr, Leigh, Day, & Constantine, 1979). Thus individuals may learn the norms, expectations, and behaviors of a number of roles and find themselves moving from one role to another (e.g. spouse, worker, parent, teacher). Hoffman (1978) from a social psychological point of view noted that the role of mother is central to a young girl's ideal of becoming a woman.

Role strain, a concept developed by Goode (1960), is "a felt difficulty in fulfilling role obligations." In this conceptual framework, stress generally results when a person cannot comply with expectations of a set of roles. Low role strain exists when the person feels able to meet the expectations of a set of roles. The addition of a new role to the already existing set of roles of a person at a particular stage of life may create difficulty in role transition. Goode (1960) predicted that the number of role obligations a person had would influence the amount of role strain, and that as the number of roles increased, the probability of role incompatibility would also increase.

In applying this theoretical model to the late birthtiming dual-career couples being studied, it could be

said that the dual-career couple may each have a "parental identity" part of themselves which emerged from their early social interaction with and parenting from their own families. It would appear that transition into this new parental role would be more facile if they have also moved out of the previous child role with their parents.

For the dual-career wife, her occupational identity may have been developed first, as the opportunity arose, and since it has become a socially acceptable option for the modern woman. In the early years of her career experience, the career woman may feel role strain when considering the possibility of adding an additional role obligation (parenthood) at that particular stage of her life (young adulthood). As the dual-career wife becomes successful and secure in her occupational role and better able to handle the role of transition into middle adulthood, she may feel able to handle the additional role of parenthood and she may decide to have her first child.

As men advance in their careers and are more successful, they may become more confident of their provider, caretaking function and begin to look forward to a new mode of self-enhancement. For men, the next step in self-enhancement may be in taking on the fatherhood role (Marciano, 1979).

In recent years, developmental frameworks have been expanded beyond childhood and adolescence. Adult development is believed to be determined by the interaction between inner processes of an individual and the social environment in which he or she lives.

The person considered the father of the modern study of adult development is Carl Jung. He understood young adulthood as a point in normal development when the person was still caught up in emotional involvements and conflicts of childhood. He felt personality reached its full growth at the age of 20 years. The next appropriate period for fundamental change occurred at age 40 (Jung, 1959).

Another figure of importance in the study of adult development was Erik Erikson whose mode of analysis was concerned with the interconnectedness of the self and the world. He saw development as a series of eight stages of ego development, each governed by need for a solution of a crucial issue for the self in relation to the external world. Each issue was stated as a polarity between opposites. The stages of Identity, Intimacy and Generativity have the most relevance for young adults. Erikson saw these stages as sequential in nature and felt that unsuccessful resolution of the crucial issue task at an earlier stage would impair development in later stages. Various empirical studies utilizing the Eriksonian framework have documented increased psychosocial maturity with age (Constantinople, 1969).

However, Erikson's framework has been criticized as being more applicable in the study and understanding of male development than for women (Constantinople, 1969; Gilligan, 1982; Hodgson & Fischer, 1979). The stages of identity and intimacy appear to be reversed for women. Sanguliano (1978) found this to be so in her study of a small nonrandom sample of women. She also found that identity issues frequently emerged at middle age for women as opposed to Erikson's adolescent identity crisis.

Now, more than at any other time in our history, women are given the opportunities and encouragement to develop an occupational identity as well as the identities of wife and mother. With social acceptance of alternative roles, the issue of identity may be a particularly difficult one for women at the present time. Perhaps the issue for dual-career women in their early thirties is not that of establishing their identity, as Sanguliano (1978) concluded, but one of generativity.

Davitz (1981) found that career women in their twenties did not have strong concerns about issues of parenthood but reported a strong preoccupation with the urge to have a child emerging around the age of 30. Fabe and Wikler (1979) in their study also noted that women began to "feel the pressure of their biological time clock" around the age of 30 and voiced concern about having a child at that time.

Levinson (1978) also identified the age of 30 as a time of stress of transition in relation to the life span. From

a retrospective biographical interview study of men between 35-40 years of age, Levinson presented a framework of life span development including four overlapping eras. He saw an individual's life structure evolving through a sequence of alternating periods of stable structure building periods lasting 6-8 years followed by transitional structure changing periods of 4-5 years duration. Developmental tasks of structure building were to make crucial choices, to create a structure around them, and to pursue one's goals within them. In a transition period, the major tasks were to reappraise the existing structure, explore new possibilities, and to work toward new choices that would provide a basis for a new structure. Levinson found that during young adulthood, men typically focused on establishing careers, re-evaluating their commitments, and becoming more family oriented in their thirties.

Few studies have applied Levinson's framework to women and no studies were found which included both men and women in their sample. Stewart (1977) utilized a grounded theory approach and intensively interviewed eleven women between the ages of 31 and 40 years. Results supported Levinson's theory of age-related stages but revealed greater variations related to the women's marital and career statuses.

Neugarten, Moore & Lowe (1965) proposed that adults experience stress as a result of a manifestation of asynchrony in the timing of life events, being "off time" in relation to societal age norms for behavior. According to

this perspective, adults periodically examine themselves in relation to the "normal life course." Stress would result from an unfavorable self-assessment. Psychological issues related to life events become recurrent throughout life and do not always occur in a single fixed order. An individual might be "on time" in relation to career development but be "off time" in relation to parenthood.

Recent research has attempted to document these theoretical positions. Women who remembered their mothers as devoting much energy and warmth to their upbringing expressed positive wishes to have children themselves (Fabe & Wikler, 1979; Houseknecht, 1979). Houseknecht (1979) also found that women who perceived their childhoods as lacking parental warmth decided early in their lives to remain childless.

The challenge to traditional sex roles inherent in the women's movement has also been an influence on women's desire for children and the timing of their births (Gerson, 1980). In spite of the intriguing finding by Blake that men view childlessness as disadvantageous, there is a significant lack of research on masculine desire for parenthood (Marciano, 1979)

### Rationale for Research

#### Factors Influencing Delayed Childbirth

In 1981, approximately one-third of all young adults lived apart from their parents or relatives but had not yet

started a family of their own. This new period of planned delayed fertility appears to be a preparation for parenthood. It appears that for the majority, the delaying of parenthood is (a) an outgrowth of the wish to have a period free for personal development, (b) to assure a stable marriage, and (c) to be financially secure before taking on the responsibility of a child (Ory, 1978).

In an examination of the U.S. fertility level, Butz and Ward (1977) proposed that the increased opportunity for female labor force participation and higher wages had created very high opportunity costs which would interfere with women's desires to have children. The process of delaying childbearing provides women with the opportunity to develop lifestyles and personally gratifying interests and activities which consume much time and energy and seriously compete with interest in the maternal role (Rindfuss & Bumpass, 1978).

A woman who repeatedly postpones childbearing and pursues career interests may eventually remain childless (Veevers, 1977). Some researchers predict that women who reach the age of 30 without having children are unlikely ever to do so, particularly if they have been married over five years (Poston & Gotard, 1975; Veevers, 1980). Apparently, the longer childbearing is postponed after marriage, the less likely it is that the couple will ever have a child.



DeJong and Sell (1977) suggested that as time passes, a woman finds it increasingly difficult to resolve value conflicts in favor of childbearing. Pronatal pressure from family and friends diminishes as the couples grow older; thus, more mature dual-career couples are less subjected to the social forces influencing many younger couples to have children (Rindfuss, Bumpass, & St. John, 1980).

Considering these correlates of childlessness, it could be predicted that many professional women and their husbands would not have children. Yet the majority of all Americans become parents (Bane, 1976; Veevers, 1980).

Blake (1979) looked at attitudes toward childlessness in America. She assumed that if children had ceased to be an economic investment there must be reasons for parenthood related to children as social investments. She conducted an investigation of public views concerning childlessness in the U.S. to determine whether children were regarded as investment goods and whether there were other kinds of consumption goods considered more attractive than children. The results indicated that children are viewed as socially instrumental. Children were minimally related to cost factors. Instead, children were perceived as having a social investment value especially for persons of lower socioeconomic status. This would suggest that for dual-career couples who are typically at higher socioeconomic levels, a child would be of low social value. Yet the opportunity costs incurred would be much higher. Her

finding that men were significantly more likely to regard childlessness as disadvantageous than were women regardless of socioeconomic status suggested that husbands of dual-career couples would be more likely to raise the issue of parenthood than their wives and possibly have more power to control the decision.

With both men and women adopting modern sex-role attitudes toward marriage and the family, was it any longer an issue of having children because they felt they "should"? Was it instead, whether they wanted children at all? Could it be that they felt the need for the role of parenthood?

In spite of the concomitant factors which would contribute to their continued childlessness, women who (a) have achieved success and satisfaction in careers, (b) have modern sex role orientations, and (c) have previously postponed childbearing, are increasingly deciding to have their first child at a later age. Little is known about the birthtiming decision-making processes of these business and professional couples.

#### Decision-Making Processes

A number of factors have been identified as possibly influencing birthtiming decisions. Most research has attempted to explain differences in population fertility and decisions related to contraceptive use (Davidson & Jaccard, 1975), abortion (Smetena & Adler, 1978), and having a child (Beach, Campbell, & Towner, 1979; Beckman, 1978; Fried & Udry, 1980).

The general theoretical framework used in these studies is derived from social exchange theory which explains social behavior in terms of actual or preferred rewards and costs incurred in social interaction (Thibault & Kelly, 1959). In this framework, the perceived values, (i.e., the ratio of satisfactions and costs) of children are believed to be important determinants of fertility preferences, intentions, and decisions (Davidson & Jaccard, 1975; Hoffman & Hoffman, 1973).

Beckman (1978) attempted to quantify and summarize the perceived value of consequences of parenthood to determine their relationship to fertility practices. She hypothesized that women would choose whether to interact within employment and motherhood roles dependent on the rewards minus cost outcomes of additional participation in both roles. The framework was used to evaluate the decision for additional children with employment being the role alternative.

In contrast to findings from other fertility studies, Beckman found that satisfaction with employment was not positively related to desire for fewer children. Neither employment intentions nor satisfactions with employment affected desire for children. Beckman's results suggested that the value of a competing alternative role (parenthood) does not negatively influence desires regarding a second role (employment). However, it does influence intentions regarding the second role. This emphasizes the complexity

of the stages of preference formation, decisions, and actual behavior regarding fertility and employment.

Beach, Campbell and Towner (1979) developed a decision aid for birth planning based on social exchange theory called subjective utility theory. This model also posited that individuals consider available choices and select alternatives which they believe will offer the best outcome.

LaRossa (1977) interviewed 16 couples expecting their first child to study how they reacted to the first pregnancy and to examine their marital systems during a transition or crisis period. Based on a supposition that conflict is a naturally occurring form of marital interaction and that power is one of the most important variables in the marital system, he suggested that in some instances, the woman's desire to have a child was motivated by a wish to gain increased power and control over their husbands.

Scanzoni (1979) disagreed with La Rossa's formulation. He stated that "power cannot be isolated and examined as a discrete entity apart from the processes of attraction, exchange, negotiation, conflict and communication." He defined decision-making as the "intrinsic ongoing interrelatedness of those several processes."

Ory (1978) explored factors associated with the decision to parent or not. The existence of childbearing norms, the strength of reinforcing social sanctions, and the influence of social structural factors on the incorporation of such norms were investigated. These

incorporation of such norms were investigated. These research findings demonstrated the widespread perception of social sanctions prescribing the two-or three-child family as the ideal. Yet nonparents continued to affirm their decision to remain childless. Examination of the data revealed that nonparents were more likely than parents to define childlessness in positive terms. The nonparents indicated that they sought reference group support to counteract pronatalistic pressures. This research suggested that the nonparents did not use a decision-making model in which the pros and cons of parenthood were based on situationally specific experiences but instead were motivated by adherence to variant subcultural norms.

Prior to the 1970's, most sociological research was based on functionalism, which was the dominant theoretical base for sex-role research (McDonald, 1978). Within that framework, the differentiation of male and female roles in society and in the family, in particular, was viewed as normative and essential for adequate personality development, proper sex-role identification, and the maintenance of the group and social stability (Pitts, 1964). Both men and women knew their parts and roles were unambiguous. The dual-career couple was a rarity and perceived as a deviant family unit by some.

With the revival of feminism, and the resulting emphasis on sex-role issues including the increased prevalence and acceptance of female employment, dual-career

marriages, and postponement of childbearing, the functionalist perspective became less relevant as a theoretical basis for family research. Other theories were introduced or rediscovered which were felt to be more explanatory of the contemporary marriage and family in a rapidly changing society. For example, Rallings and Nye (1979) explained female employment from a social exchange perspective and La Rossa (1977) utilized conflict theory in explaining decision-making among marital dyads.

The use of a number of theoretical perspectives offers the family researcher different lenses through which to view family and marital behavior. Thus, several theoretical perspectives brought to bear on a special family or marital topic yields different though complementary insights into unexplored areas. Broderick (1971) suggested that by utilizing a multitheoretical approach for framing hypotheses and interpreting results, a fuller understanding of family and marital behavior might be achieved.

This study reviewed the birthtiming decision-making of dual-career couples who have postponed childbearing until the wife was 30 years old or older within a variety of theoretical frameworks. It was believed that these varied perspectives provided a greater flexibility of approaching an unexplored area of study and would provide insights not possible through the application of only one theory.

### Need for Research on Late Birthtiming Decision-making

Research on marriages of dual-career couples, on their marital stress, and on childbearing intentions and behavior of women has increased during the last decade. However, there is a scarcity of information about changes in childbearing decisions among individuals in their adult years. A review of the research literature in demography and sociology of marriage and the family revealed no research focussed on the decision-making processes of dual-career couples who had postponed childbearing to have a first child at a later age.

Research on fertility and childbearing intentions has largely focused on females. Male subjects are rarely included and couples have not been examined as a unit.

Although it has been predicted that professional women and their spouses are likely to remain childless or experience a great deal of ambivalence about childbearing (Rossi, 1980), the processes and consequences of their childbearing decisions have not been studied.

Professional women and their spouses might benefit from greater knowledge about the birthtiming decision-making processes. Conflicts around this issue may affect the stability of their marriages since research suggested that men find being childless more disadvantageous. Therapeutic intervention with these dual-career couples might help them to resolve their birthtiming conflicts and childbearing

conflicts so that the marriage could be maintained. Continuing education workshops, support groups, or mental health prevention groups could assist dual-career couples who have postponed childbearing in clarifying values and resolving conflicts related to their birthtiming and childbearing decisions.

As more is learned about the consequences of delayed parenthood, family life educators and family and marital counselors can provide information for support and assistance to couples during the decision-making process. Knowledge of the stresses unique to these dual-career couples can be of help to those in the helping professions in providing appropriate assistance.

#### Purpose of the Study

The purpose of this study was to develop a model of antecedent factors associated with late birthtiming of dual-career couples. Given the review of the literature, such factors are biological time clock, career status, marital stability, and parenting role identity. The salience of these factors and the order of occurrence were expected to be discovered through intensive interviews with dual-career couples who had chosen to have a child after postponement of parenthood.



## CHAPTER II

### PROCEDURES FOR COLLECTING AND ANALYZING DATA

The present study is concerned with identifying the salient factors which must be present for a dual-career couple, that has postponed childbearing to decide to have their first child. Since no research was found to guide the design of data collection for a quantitative study, a qualitative methodology was selected.

#### A Case for a Qualitative Research Approach

A research methodology was required which could tap the socially constituted real worlds of these dual-career couples which served as the basis for their individual actions and their decision making process about birthtiming. Schwartz & Jacobs (1979) considered qualitative research methods as best for gaining access to the life world of other individuals in a short time. In their definition, the life world of other individuals included motives, meanings, emotions, and other subjective aspects of the lives of individuals and groups. It also included the behavior of the "actors" in ordinary situations and settings, the structure of those actions, and the objective conditions which accompanied or influenced them. They stressed the necessity to recognize and have access to meanings and other inner phenomena in order to see and describe behavior in any

detail. The actor's subjective point of view was considered central to qualitative sociology.

Glaser and Strauss (1965) argued that qualitative data result often in de facto conclusive analysis, and that therefore, it should be suited for the formulation of concepts and hypotheses for a given substantive area. The authors proposed that theory discovered through qualitative research rarely requires additional inquiry since it often results in the end product of research within a substantive area.

Beckman (1978), who investigated couples' decision-making processes regarding fertility, concentrating on social power and influence of the spouses, conflict resolution, and bargaining and exchange processes, felt the questions between general decision making and specific fertility decision making remained unanswered. In-depth interviewing and laboratory observations were recommended to provide a fuller multidimensional picture of couples' decision-making processes. Survey data were recognized as providing valuable information on couples' decision-making processes, but the need for development of other methodologies including qualitative ones for future research was stressed.

#### Reasons for Use of Unstructured Research Methods

Little is known about dual-career couples who are deciding to start a family at a later age. A search of the literature revealed no studies on this specific group.

Because this exploratory study sought to understand the unknown properties of these dual-career families, a research methodology was required which would examine a small number of cases in search of the salient factors. Further cases would be used to formulate, test, and reformulate the necessary and sufficient conditions under which the decision to bear a child would occur. Generalizations of the results to other dual-career couples faced with deciding whether to have a child or remain voluntarily childless might be made only after testing the model of conditions on a representative sample.

Analytic induction has been used as the research method of choice by qualitative researchers such as Plato, Aristotle, and Galileo (Bronowski, 1975; Zaneicki, 1934). The method of analytic induction was used by Lindesmith (1947) to study addiction, by Cressey (1953) to study embezzlers, by Becker (1963) to study marijuana use, by Becker and Geer (1969) to study college students and by McCleary (1978) to study parole officers.

#### Methodology of Analytic Induction

Analytic induction is concerned with the discovery of causal relationships. It requires careful examination of all available evidence including intensive in-depth study of individual cases. It calls for constant testing of the data against the emerging patterns and explanations (Gelles, 1982).

This generates integrated, limited precise, universally applicable theory accounting for a specific phenomenon. It tests a limited number of hypotheses with all available data. The theory is then generated by the reformulation of the hypothesis and redefinition of the phenomenon forced by constantly confronting the theory with negative cases (Glaser & Strauss, 1970).

The method consists of taking a number of instances in which the phenomenon occurs and finding a set of conditions which always accompanies that phenomenon and without which it does not occur. Only if it is known that the phenomenon never fails to occur in the presence of the conditions can the occurrence be predicted. It is well established that prediction and explanation have identically the same logical form. It can be said that an explanation is not fully adequate unless time taken into account, it could have served as a basis of predicting the phenomenon under consideration.

Analytic induction is a method of isolating the essential variables which determine the phenomenon. Its success in producing complete explanations is due to its procedure and its systematization of the method of the working hypothesis (Becker, 1970; Becker and Geer, 1969; Lofland, 1971, 1978; McCleary, 1978; Robinson, 1969). Cressey (1953) outlined steps in analytic induction for greater ease in understanding the alternation of data collection and hypothesis generation.

### Steps in Analytic Induction

1. Formulate a rough definition of the phenomenon.
2. Formulate a hypothesized explanation or model of the phenomenon.
3. Study one case in light of the hypothesis with the objective of determining whether the hypothesis or model fits the facts of that one case.
4. If the hypothesis or model does not fit the facts: (a) reformulate the hypothesis or (b) redefine the phenomenon so that the case is excluded.
5. If all cases fit the formulation, practical certainty is attained. But the discovery of a single negative case disproves the formulation and requires a redefinition.
6. Continue to examine cases, redefining the phenomenon and reformulate the hypothesis until a universal relationship is established with each negative case requiring a redefinition or reformulation.

### The Working Hypothesis

The method of analytic induction formalizes and systematizes the method of the working hypothesis. This method is a knowledge-building, self-correcting procedure through the analysis of deviant cases to be explained.

1. Altering the hypothesis is the method of the working hypothesis. The underlying premise is that even a false hypothesis may be useful in directing observation and checking it against the facts. The logical procedure of verification or disproof is intimately bound up with the procedure of discovery. The character of observations that bring about the disproof of one hypothesis often suggest the sort of modification that ought to be made to create a better hypothesis.
2. The second modification which may come about in applying the method of analytic induction is that of redefining the phenomenon so as to exclude cases which contradict the hypothesis. This limits the range of the applicability of the working

hypothesis. This limitation of the universal in analytic induction is to insure causal homogeneity in the cases to be explained. This method calls for studying only those cases in which the phenomenon occurs (Barton & Lazarsfeld, 1975; Kidder, 1981; Lofland, 1971; Robinson, 1969).

This procedure of checking each newly formulated hypothesis with all previously recorded interviews and/or observations forms the basis for analytic induction and negative cases (Kidder, 1981).

#### Methodological Issues of Analytic Induction

Qualitative methods of research are not without their critics. Some researchers argue that the qualitative researcher selectively collects and analyzes nonrepresentative data (Robinson, 1969; Turner, 1969). Bogan & Taylor (1975) pointed out that the researcher acts as a "selective sieve" in all forms of research. They suggested that all those involved in research, whether it is in the form of survey research, participant observation, or in-depth interviewing, choose questions which reflect their judgement of what is important. This is assumed to impose a preconceived structure onto the research subject.

Other critics charge that the presence of the qualitative researcher elicits nonrepresentative data, thus introducing bias or error (Johnson, 1975). Although researchers cannot help affecting the subject's behavior, authors generally agree that error due to observer or interviewer presence can be minimized through sensitivity of

the researcher to its existence and awareness of conflicting reports from the informant (McCall & Simmons, 1969).

Robinson (1969) criticized analytic induction because of its inadequacy in establishing clear cut causal relationships and neglect of sampling procedures. Turner (1969) on the other hand, sees analytic induction as having a special contribution to make in constructing theoretical categories which permit the logical deduction of the causal hypotheses from the properties of the data.

#### Criticism of Qualitative Research Methodologies

Critics of analytic induction also challenge the lack of experimental control. However, Donald Campbell, well known for rigorous application of quasi-experimental methods in field settings (Campbell & Stanley, 1966; Cook & Campbell, 1979) recognized the dialectic of research and gave Howard Becker (1961, 1963, 1968) credit for using both qualitative and quantitative methods in analytic induction. In fact, when negative case analysis is used it insures a perfect correlation because the causal hypotheses are constantly revised until they fit every case. The research continues until there are no outliers or exceptions to the rule.

In statistical analysis, the presence of error variance is assumed. Statistical tests are necessary when the ratio of explained variance to error variance is obviously not great. If the difference were discernible to the naked eye, statistical tests would not be necessary.

This is the case in qualitative analysis because there is no random error variance. Negative case analysis eliminates all exceptions by revising the hypotheses until the data fits. Therefore, negative case analysis replaces statistical analysis in qualitative research (Kidder, 1981).

Empirical researchers quickly become aware that the demands of internal and external validity are often contradictory. Campbell (1957) made this point quite explicitly. He advised that when a choice between the two types of validity must be made, internal validity should always be given priority. Bulmer (1974) had more recently expressed concern about this same internal validity issue.

When qualitative researchers list repeated instances of an event, the list serves as a reliability check. It shows that the variable which the event represents occurs and that the concept is not based on chance observations. Repeated observations of how people respond in certain situations can be regarded as either reliability or validity checks or as a combination (Kidder, 1981).

Questions have also been raised about external validity. Conclusions of external validity depend on the replicability of the research across other persons, times, places and operationalizations of the treatment and effects. In qualitative research, external validity depends on the researchers' demonstration that similar results occur in other settings. Qualitative researchers achieve external validity by showing how the studied process is similar to



processes that occur in other places and with other people (Kidder, 1981).

#### Preliminary Analysis of Late Birthtiming Decisions

Since there is little available information about dual career couples who have postponed childbearing but who are now increasingly deciding to have children at midlife, information from preliminary interviews with several couples who fit the research criteria was carefully noted.

Following the steps of analytic induction, a rough formulation of factors thought to influence the decision of dual-career couples to have a child when the wife was 30 years of age or older was proposed. Thirty years was chosen as the younger dimension of age because the greatest increase in first births is occurring demographically in the 30-34 year old group. It is at age 30 years that childless women often become preoccupied with the childbearing issue. Pressure from the wife's biological time clock, completion of education, and career goals were considered important and strong influences on the birthtiming decision-making of these couples.

Couple A talked with the researcher in their home for about two hours. The conversation was taped and later transcribed. The text of the transcript was coded with different colored pens to represent categories of factors suggested by the verbal responses of the husband or wife.

### Emerging Influencing Factors

Analysis of the initial data revealed that the couple had felt pressured by the wife's age and that she had raised the issue of wanting a child when she turned 32. The husband had completed his education and was established in his career, but it was at this point that the wife had just completed her doctoral degree. The couple believed they could incorporate a child into their relationship without changing their lifestyle and standard of living.

While these factors seemed necessary to influence the couple, four other factors emerged to complete what might be the sufficient conditions for this couple to make the decision to have a child. In couple A, the husband had not been concerned about becoming a father and initially was uncertain if he would ever want a child. Therefore, he supported his wife's decision to postpone childbearing during the first eight years of their marriage. The wife verbalized that she had "things to work out" before she could become a mother. This variable has been designated "Role Identity Issues." Both the husband and wife commented on a certain stage of marital commitment and solidity that had evolved over the years of their marriage which enabled them to feel secure in starting a family. This was labeled "Marital Commitment."

A meaningful factor to the partners identified in this conversation was the messages they had received from their respective mothers about the timing of childbearing. The

wife's mother had said she had had children before she had wanted them and as a result she had not been able to do the things she had wanted when she was young. The husband had received a nonverbal message from his mother that she had felt dissatisfied being only a wife and a mother. He felt she would have been happier if she had been involved in a job or career outside the home. Although the wife's mother had exerted pressure on the couple to have children in the early years of their marriage, it was the family injunction about not having children too early which was adhered to by the wife. This variable was labeled "Family Injunctions."

The hypothesis was reformulated to include the additional influencing factors identified in the first interview. It was hypothesized that possible necessary and sufficient conditions for a dual career couple to decide to have a child after planned postponement of childbearing would include these factors:

1. Biological time clock of the wife
2. Career status and/or educational goal attainment
3. Family injunctions
4. Role identity issues
5. Financial security and continuation of established lifestyle
6. Marital commitment

A second couple (B) was interviewed to test this working hypothesis. The couple was interviewed in their

home for about two hours. The wife was 30 years old and due to have the couple's first child several weeks after the interview. The same procedure was followed for recording, transcribing, and coding the interview data as described with Couple A.

Couple B had been married five years. Both had completed their education and were in careers at the time of their marriage. Analysis of the conversation revealed that the husband had felt ready to have a child for four years. He had married at the age of 29 and had felt after one year of marriage that it was a stable union and had wanted to have a child. An important aspect of identity issues in his life had been reaching "independence and autonomy." He felt he had achieved these as well as educational/career goals prior to marriage.

His wife had a strong birthtiming injunction from her mother which dictated that she should not have her children when "too young" and that she should do "some living" before having a family. She had developed a list of things she had wanted to do to "live a little" such as going to Europe with her husband prior to becoming a parent. She feared she would not be able to do these things after having children.

Two factors seemed to make it possible for the wife to agree to have a child even though she had not accomplished all the things on her list. A change of jobs to one offering flexibility in hours with the summers off and minimal emotional pressure made her feel that she had more

energy to invest in a child. Also she began to feel pressure from her biological time clock.

Husband B introduced an additional factor influencing his wish to have a child. When he became thirty, he felt he wanted a child to raise and "carry on his name." This desire for generativity is labeled "eternity issues."

Financial security, marital commitment and role identity issues had been dealt with as far as both husband and wife were concerned. It appeared that an influencing factor for Husband B was an "eternity issue." A job change and pressure from Wife B's biological time influenced her to proceed with her first pregnancy. From the conversation with Couple B, the working hypothesis was confirmed and an additional influencing factor, "eternity issues" added to the model.

The limited literature and conversations with two couples produced several tentative antecedent factors which impinge on the consequent variable: the decision of dual career couples who have delayed fertility to have a first child.

#### Definition of Influencing Factors

This list of factors represented a preliminary ordering or classification of factors initially identified as positively influencing dual career couples to proceed with having their first child after postponing childbearing until the wife was 30 years of age or older. They evolved from an attempt to analyze the relationship between the preliminary

factors proposed in the initial working hypothesis and the data produced from the conversations with two couples.

Biological Time Clock. The chronological age that constitutes a fertility deadline is menopause when menstruation permanently ceases. As a woman approaches menopause her ovaries stop producing a monthly ovum and stop secreting the cyclic supply of estrogen. At the same time, there is a decline in the production of progesterone. These hormonal changes mean that the woman is no longer able to conceive and bear children. It usually occurs between the ages of 48 and 52 years. Many medical experts define the optimal time for a woman to have children as between 24 and 29 years. Although the increasing use of amniocentesis has reduced the risk of bearing an abnormal child to older women and making it safer for women to conceive at midlife, the statistical risk although small, is greater with each passing year and increases in an exponential progression after age 32 (Weideger, 1976).

Role Identity Issues. Identity refers to the clear sense of self (who you are and what you want to be). It includes both a sex role identity and occupational identity. Human behavior is understood as a process in which the person shapes and controls his conduct through the mechanism of role taking. The child when small takes on the role of the parent of the same sex, imitating the maternal role in the case of the young girl (Bulmer, 1974). Individual identity is believed to be established to the degree to which an individual feels independent and emotionally separate from the family in which he/she grew up. The decision to have children frequently signals the end of a period of identity experimentation during which there is a non-threatening distance from or non-identification with one's parents. If the person is still enmeshed with the parent, he or she cannot choose to have a child and take on the parenting role (Bowen, 1978). Since the opportunity costs in childbearing still impinge more heavily on women than men, this may be a particularly salient variable for the wife (Butz & Ward, 1977), but it is just as necessary for the husband to have achieved a separate individual identity in order to take on the parenting role. There is some evidence that the issue of identity is more difficult for women than men in today's society. Women are encouraged to develop an occupational identity and also to be wives and mothers. Achieving a balance between family and

work roles has been found to be a salient issue for women in their early thirties (Stewart, 1977).

Career Status and/or Educational Goal Attainment refers to the completion of educational goals and/or career expectations set for his/herself prior to plans for taking on the parenting role. This includes the choice for the wife to continue in her career at the same level on the career ladder after the birth of her child if she so chooses.

Financial Security and Continuation of Established Lifestyle refers to the couple's ability to continue their lifestyle at the same standard of living after the birth of a child. A major difference between couples who have children and those who do not is in lifestyle. The childless couple's life is adult centered, characterized by a perception of freedom and spontaneity (Veevers, 1977). The perception of freedom is also related to the financial resources available for childcare and the opportunity for the couple to spend time together in leisure activities. It also refers to the financial freedom of the wife to choose to remain at home after the birth of her child or to continue in her career at less than full time involvement if she so chooses.

Marital Commitment refers to the propensity of the couple to stay married. Professional men and women have a high rate of marital disruption. As a result, they may be reluctant to add a child to their marriage until they are assured that it will be a potentially stable family situation. Women with five years of college have the second highest divorce rate of any women (15% for women with five years of college, 19% for women with six or more years of college). For men, a similar pattern is evident. Males with five years of education have a 10% divorce rate, and those with six or more years of education have a 12% divorce rate (Houseknecht, 1979). Therefore, a strong marriage would seem a prerequisite for parenthood in these highly educated dual career couples.

Family Injunctions of husband and wife refers to those parental prohibitions about birthtiming incorporated by the individuals in their conscious life plan which influences and makes predictable the rest of their lives. Examples: "Finish your education before you have children," or "Do what you want before you have children or you will never get to do it". There are also nonverbal injunctions identified by the child such as: "I always felt my mother was unhappy staying home with children. I thought she would have been happier

if she had pursued a career." There are sometimes competing injunctions. For example, the same mother who was unhappy in her maternal and homemaker role might have verbalized that her children would be unhappy and regret it when they were old if they did not have children at all (Steiner, 1974).

### The Proposed Model

Figure 1 illustrates the proposed model of necessary and sufficient conditions for a couple to decide to proceed with having their first child after postponing childbearing. The model portraying the impingement of these seven influencing factors on the couples' decision to have a child was constructed after considering both the temporal and logical sequences.

Although a woman's childbearing years are not over until menstruation ceases, most women begin to experience concern about how much time they have left in which to produce a viable child at about 30 to 32 years of age. Pressure from the wife's Biological Time Clock is a necessary condition before the dual-career couple who have previously delayed starting their family will consider the next five factors which also influence their decision.

Role Identity Issues, the Career and Educational Goal Status for both the husband and wife, the couple's Financial Security and status of Marital Commitment are all separate but interrelated conditions to be met to varying degrees before the couple can make an affirmative decision about childbearing.



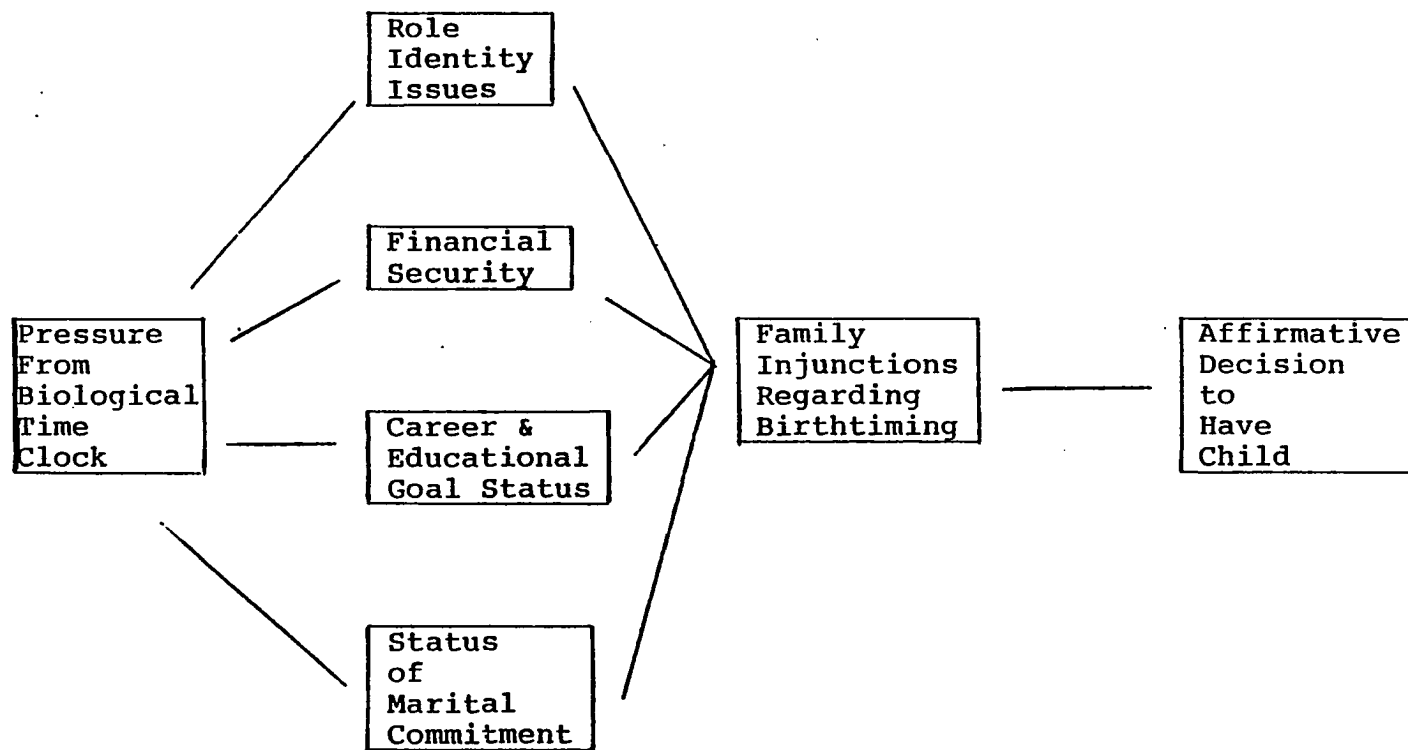


Figure 1. The Proposed Model for Late Birthtiming Decision

Not until these five conditions are met can the couple handle the last condition Family Injunctions regarding child birthtiming. Therefore, this factor is in a singular space in the model.

### Procedures for Data Collection

#### Subject Selection

Thirty dual career men and women (15 dual career couples) who had chosen to delay fertility until the wife was 30 years or older were studied intensively to determine the salient factors influencing their decision to have a first child. Dual career couples are defined as a type of family structure in which the heads of household, both husband and wife, pursue active careers. Career designates the type of job sequences that require a high degree of commitment and that have a continuous developmental character which includes the opportunity for personal development and advances in pay or status (Rapoport and Rapoport, 1971 & 1980).

These couples had to have been married at least two years and had to have made a decision to delay fertility until the wife was 30 years or older and then had decided to have a first child. All couples referred who had delayed having children because of fertility problems were eliminated from the study.

Random sampling methods were not appropriate for the small number of couples to be studied. Snowball sampling, a

method used when numbers of a universe cannot be located by random sampling was utilized in identifying the dual career couples who fit the research criteria. Husbands and wives in each dual-career couple interviewed were asked for names and addresses of other dual career couples who fit the criteria. Ultimately 36 dual-career men and women were contacted to participate in the study. Two wives had delayed childbearing because of long standing fertility problems which were eventually resolved through medical treatment. Another wife had delayed marriage until she planned to have a child. These three cases did not fit the research criteria and were eliminated from the study.

After couples were identified, they were contacted by telephone. A verbal description of the research project was given. They were invited to participate in the research if they fit the criteria. This telephone conversation was followed by a short written description of the project which was sent out immediately (See Description of Study and Consent Form sent to participants in Appendix A). The couples were re-contacted within a week to inquire whether they had made a decision about participation. If they agreed to participate, an appointment for the first interview to be held in their home was arranged.

#### Interviewing Procedure

This research was based on conjoint unstructured in-depth interviews which were held with each couple. Content of the interviews was guided by the couples' spontaneous

verbalizations of reasons why they decided to have their first child after postponing parenthood and by the factors believed to have an influence on their decision-making which emerged from earlier interviews. A short questionnaire was also administered to gather information on age, income, education, and sex-role preferences and attitudes of the couples. (See Appendix B).

Conjoint interviewing was chosen since it was the mutually understood conceptions of the husband and wife about the factors influencing their decision to start a family which were desired. All interviews were conducted by this researcher in the couples' homes at their convenience. The interviews were tape recorded and transcribed following the interviews.

In this kind of unstructured interviewing, the many facets of the couples' lives and issues as they related to their birthtiming decision were explored as they emerged in the discussion. This intensive interviewing strategy is a means of generating subjective data, the personal perceptions and attitudes of people's lives which are not always apparent. It was designed to provide the dual-career couple with the freedom to introduce new material which might not be anticipated by the interviewer (or by the interviewee). The order in which the hypothesized influencing factors were to be introduced was not fixed. They were introduced only if the interviewed couple did not produce them during the course of the taped conversation.

The comments of the interviewer served as stimuli for the couples to respond with their own thinking and perceptions of the factors which influenced their decision-making process in regard to having their first child. The key to this type of study is listening. The couples lead the discussion through their lives and their decision to have a child. It was the interviewer's responsibility to guide the conversation in such a way that the hypothesized influencing factors were introduced and covered. (These varied with each interview as the working hypothesis was reformulated.) During the interview, the interviewer kept in mind those factors which the couples introduced and discussed. Mental notes were kept of what needed to be covered before terminating the interview.

The task in the beginning of the interview was to establish an atmosphere of comfort and intimacy with the couples. A verbal description of the purpose of the study and assurance of confidentiality and anonymity was given.

The historical context of each couple's marriage was obtained early in the interview. Through asking how the couple met, where they grew up, about their families of origin, and the duration of their marriage, a history of their life together emerged. The interviewer asked direct questions if pertinent information was not volunteered after some rapport was established. Reasons for postponement of childbearing were also asked if they were not volunteered. The couples were then asked what conditions made it right

for them to proceed with having their first child when they did.

When couples introduced issues that related to the hypothesized antecedent factors, they were labelled by the interviewer. For example, if a wife said, "Well, I wasn't getting any younger", the interviewer responded: "You were feeling some pressure from your biological time clock?" If the hypothesized influencing variables were not introduced spontaneously, the interviewer attempted to probe for them. An indirect probe was attempted first to elicit a volunteered statement. If that was not successful, a direct question was asked. (See Interviewing Probes for Hypothesized Variables, Appendix C).

At the conclusion of the interview, the couples were encouraged to contact the interviewer if they had additional thoughts or ideas about factors which they felt had influenced their decision to have their first child. The interview was left open ended so the interviewer also could contact the couple if she had additional questions after reviewing the tape recording or transcript.

#### Description of Sample

Following the interview, a short questionnaire was administered which asked information about the age, length of marriage at the time of the birth of the couples' first child, educational level, occupation and income. This also required completing the Sex Role Preference and Attitude scale.

Age of Wives and Husbands at First Birth. The ages of the dual-career wives ranged from 30 to 37 years at the time they had their first child. Their mean age was 33.2 years. The husbands ranged in age from 31 to 42 years with a mean age of 35.5 years.

Table 1

Ages of Wives and Husbands at Birth of First Child

Wives	Husbands
37	40
37	36
35	42
35	36
34	34
34	34
33	35
33	32
32	39
32	37
32	36
32	34
32	32
30	35
30	31
<hr/>	
Wives Mean Age: 33.2	Husbands Mean Age: 35.5
Wives Range: 30-37	Husbands Range: 31-42

Note: Because the biological time clock is a physical reality for the dual career couple, and particularly the wife to consider in the issue of later parenthood, the ages of the wives are placed in descending order.

Duration of Marriage. This particular sample of dual career women does not appear to have deferred marriage but has delayed childbirth after marriage. Baldwin and Nord

(1984) reported that the median interval between marriage and first birth for mothers over 30 years is now 60 months. This group of dual career mothers appears to be representative of the national trend since over half of them (8 out of 15) were married four to six years before the birth of their first children with a median length of marriage of six years prior to becoming parents. (See Table 2).

Table 2

Duration of Couple's Marriages at Birth of First Child

Interval	Couples
1-3.5 years	2
4-6.5 years	8
7-9.5 years	0
10-12.5 years	4
13+ years	1
Total	15

Education. One proposed necessary condition for deciding to have a child was that both husband and wife would have completed all or a significant segment of their educational goals or would be established in their respective careers. The educational level and occupations of the individual partners by the time of the birth of their first child was asked. The results are shown in Table 3.



Table 3

Educational Level at Birth of First Child

Wife	Husband
M.D. and Residency	B.A. & Rabbinical Training
Ph.D. & Post Doct. Intern	Ph.D. & Post Doct. Study
Ph.D.	Ph.D. & Post Doct. Study
Ph.D.	Ph.D.
Ph.D.	M.S.W.
J.D.	M.D. & Residency
J.D.	J.D.
M.B.A. & M.A.	M.B.A.
M.S.W.	M.S.W.
M.A.	J.D.
M.A.	Ph.D.
M.A.	M.A (ABD)
M.A.	B.A.
B.A. & Post Grad.	B.A.
Partial College	Partial College

Note: Since childbearing is a more salient issue for the career woman and may be delayed in order to complete educational goals and satisfy an "occupational identity" this table is organized in descending order of the wife's educational level.

These 30 dual career men and women were a highly educated sample. All but two of the men and women interviewed (93%) had at least a Bachelor's degree. Half had either law degrees, medical degrees with specializations, or doctorates. Ten had master's degrees. One of the ten who held a master's degree in fact had earned two masters' degrees.

Occupation. Five women (one third) in the sample had occupations considered more prestigious on the Duncan Occupational Scale than those of their husbands. Four more wives had occupations considered as prestigious as their husbands' while 6 had occupations considered less

prestigious than those of their spouses. That over half (60%) of the wives held occupations considered more or as prestigious as those of their husbands reflects the uniqueness of this particular group of couples who decided to delay childbearing in many instances so that the woman could develop her career before taking on the added role of parenthood, and abetted by the fact of the increasing acceptance of women in more prestigious, traditionally male occupations. Eight of these-dual career wives held jobs which have been traditionally considered male occupations: physician, lawyer, journalist, auditor, stock broker, and a mathematician who is involved in computer software development in business.

Table 4

<u>Occupation of Wives and Husbands at Birth of First Child</u>	
<u>Wives</u>	<u>Husbands</u>
Lawyer	Lawyer
Lawyer	Physician
Physician	Clergyman
College Teacher	Social Worker
TV Journalist	Lawyer
Social Science Researcher	College Teacher
Biostatistician	Social Worker
Psychologist	Biochemist
Psychologist	Psychologist
Auditor	Auditor
Office Manager	TV Advertising
Stock Broker	Banker
Teacher	Psychologist
Teacher	Stock Broker
Computer Software Dev.	College Teacher

Note: This table is arranged in descending order of the prestige of the wife's occupation as categorized by the Duncan Occupational Scale, 1961.

Income. The individual income of each spouse at the time of the birth of their first child was requested because financial status and the ability to maintain an achieved lifestyle after the birth of a child are suggested as influencing factors. This is shown in Tables 5 and 6.

Table 5

Income Levels by Couples at Birth of First Child.

Couple ID	Husbands	Wives
1.	\$25,000-24,999	14,999 or less
2.	\$15,000-19,999	15,000-19,999
3.	\$15,000-19,999	20,000-24,999
4.	\$20,000-24,999	15,000-19,999
5.	\$25,000-29,999	20,000-24,999
6.	\$15,000-19,999	35,000-39,997
7.	\$25,000-29,999	25,000-29,999
8.	\$25,000-29,999	20,000-24,999
9.	\$20,000-24,999	14,999 or less
10.	\$25,000-29,999	15,000-19,999
11.	\$25,000-29,999	20,000-24,999
12.	\$15,000-19,999	14,999 or less
13.	\$30,000-34,999	30,000-34,999
14.	\$20,000-24,999	20,000-24,999
15.	\$15,000-19,999	15,000-19,999

Table 6

Separate and Combined Income Levels at Birth of First Child

Income Range	Husbands	Wives	Combined
Less 14,999	0	3	0
15,000-19,999	5	5	0
20,000-24,999	3	4	2
25,000-29,999	6	1	2
30,000-34,999	1	1	0
35,000-39,999	0	1	6
40,000-44,999	0	0	4
45,000-49,999	0	0	8
50,000-54,999	0	0	2
55,000-59,999	0	0	4
60,000-64,999	0	0	0
65,000-69,999	0	0	2
TOTALS	15	15	30

Income was divided into husbands, wives and combined income of the couple. The majority of husbands (14) in the sample earned between \$15,000 and \$29,999 while the majority of wives (12) earned between less than \$14,999 to 24,999 although the ranges for both husbands and wives were higher. One wife, but no husbands, earned between \$35,000-39,999. While several of the women were employed in traditionally feminine occupations which earned lower salaries, the lower incomes of the women also reflect the fact that ten women were working part-time prior to finishing their advanced degrees. The combined incomes (figured by taking the mid-point of the income interval the individual husbands and wives fell within) ranged from \$20,000-24,999 to \$65,000-

69,999; with the majority (9) of couples' incomes falling between \$35,000-49,999.

When income level is examined by couples, wives in the sample earned less than their husbands in eight instances. Five women earned in the same salary range as their husbands and only two women earned higher salaries than their husbands.

Another question relevant to the couples in the sample was whether their career motivation was related to having a mother who served as a role model. Had either the husband's or wife's mother pursued a career? Each was asked about their mother's career orientation when they were growing up.

Eleven of the husbands and 11 of the wives reported that their mothers did not have careers or had not worked while they were small children. Of these 22 out of 30 mothers of the sample population who did not have careers, two had wanted careers their parents would not allow them to pursue and one had a career which she did not pursue after having children (the traditional and expected pattern). One of the mothers developed a career which she carried out at home after all her children were in school. Of the eight mothers who worked, four worked out of necessity as single parents and two more worked to supplement family income. One mother in a scientific career track, left the profession to raise four children. One career secretary married late (37 years) and did not return to work until her only child was 12 years old.

Sex-Role Preference Scale and Scores. One assumption made about these dual-career couples was that they had adhered to modern sex-role attitudes which influenced their delayed fertility. In order to substantiate this assumption, a scale to measure sex-role orientation was included in the questionnaire (See Appendix A). The sex-role preference scale (SRPS), is a Likert-type scale with five response categories ranging from strongly agree to strongly disagree. Each of the items that comprise the SRPS have been shown in prior research efforts to be valid and reliable (Scanlon, 1975, Tomeh, 1978). These items are short statements indicating either a "traditional" or "modern" sex-role preference. Modern preferences stress equality between the sexes, each spouse having the right to pursue a career;, and within marriage, household and child responsibilities are equally shared. Traditional preferences suggest that a woman's primary purpose is to be responsible for household and child care tasks, subordinating her own interests for the well-being of the family. In this preference, men are assigned as head of the household and primarily responsible for making major decisions. Individual sex-role preference scores were assigned to husbands and wives in the sample and used to construct the fourfold typology of sex-role preference patterns defined earlier. The procedure is outlined below (Bowen, 1981).

1. Individual husband and wife scores to the SRPS were obtained first by recoding alternatively worded items in a "modern" direction, then the summated responses of each spouse to the 13 items that comprised the scale were averaged. The highest possible score on the SRPS was four with higher scores indicating a "modern" response pattern and lower scores a "traditional" response set. This scoring procedure resulted in each spouse being placed on a sex-role preference continuum ranging from high traditionality to high modernity.
2. Spouses who scored below the median point for their respective gender group were assigned to the "traditionalist" group, those above the median were placed in the "modern" group. Two groups respective to each gender category (male, female) resulted from this procedure: Husband modern, husband , traditional, wife modern, wife traditional.
3. For purposes of analysis, respective spouses were then paired together for a typological framework of four mutually exclusive and exhaustive marital types:
  - Husband and wife each modern (MM)
  - Husband as modern and wife as traditional (MT)
  - Husband as traditional and wife as modern (TM)
  - Husband wife each traditional (TT)

This typology provided an assessment of the relationship between the sex-role preferences of husbands and wives. The results of the Sex-Role Preference Scale are presented in Table 7 and Table 8.

Table 7

Marital Types by Sex-Role Preference

	H&W
1. Husband and Wife each modern (MM)	12
2. Husband as modern and wife as traditional (MT)	4
3. Husband as traditional and wife as modern (TM)	8
4. Husband and wife each traditional (TT)	6
TOTAL	30

Table 8

Scores on Sex-Role Preference Subscales

	Husbands		Wives	
	Median Score	Range	Median Score	Range
Mother Scale	22	14-29	23	15-29
Wife Scale	14	10-18	14	11-19
Father Scale	22	14-28	26	18-28
Husband Scale	15	12-19	15	12-20
Total SRPS	76	57-92	81	57-95

Eleven (73%) of the dual career wives scored modern on the SRPS. Seven men or (47%) were considered to have modern sex role preference attitudes. Eight (53%) of the husbands and five of the wives scored as having traditional sex role preference attitudes. Nine (80%) of the couples were in agreement in their sex role preference attitudes.



For a summary of this descriptive data, see Summary Table of Sample Characteristics in Appendix D.

#### Procedures for Analyzing Interviews

Taped interviews were replayed after each interview prior to later transcription. Sets of conceptual categories identified by the couples as influencing their decision making were selected from the interviews. Results of the early analysis from the replaying of the tapes were used to direct further data-gathering operations. After transcription, these selected passages related to influencing factors were coded by using different colored felt-tip pens each assigned to a different identified factor. Results of these coded influencing factors by two raters were recorded in Appendix E.

The responses were coded "1" in the table if the husband or wife verbalized that the factor was an issue which had been resolved before proceeding with the decision to become a parent. If the husband or wife indicated that the factor had not been an issue in their decision, it was coded "2". (In some instances, a husband or wife would state that the factor had not been a concern in one instance, and later indicate the opposite, that it had been an important influencing factor. In those instances, the coder made a decision on the basis of all the data presented in the interview). If the factor was not mentioned at all, it was coded "---". Issues which had not been resolved until

the birth of their child were coded "3". Unresolved issues were coded "4". In those instances where influencing factors were positive or negative, they were coded + or -.

A paid research assistant who is a trained clinical psychologist read duplicate copies of the transcripts to determine the frequency and quality of statements that referred to each influencing factor. These were coded as described above. Results of the coding across the model by the author and the research assistant were the same except for one factor in three cases. When there was not agreement between the author and the research assistant, a third opinion was obtained from a second paid research assistant who is a clinical social worker and a resolution was achieved.

#### Limitations of the Study

Although the major limitations of this study are methodological -- the small sample size, and noncollaborative data collection and analysis, some of its major strengths are also in the methodology. Nonquantitative research must be used to get at what are probably the most central issues in furthering our understanding of how couples make decisions and how families function. Qualitative research is characterized by a "living description" of these processes which are the basis for the development, testing, and definition of a theory.

The limited number of specific couples interviewed made it difficult to generalize findings. However, there is a dearth of information about the factors influencing the decision of dual-career couples who have delayed childbearing to proceed with starting their families at a later age. Although this study cannot assume to make generalizations to all the late birthtiming dual-career couples, it can help to build a base of knowledge to assist the couples themselves or counselors working with dual-career couples contemplating a late birthtiming decision.

### CHAPTER III

#### RESULTS AND DISCUSSION

Analysis of the cases revealed several recurring themes which characterized the decision making of these dual-career couples. Analytic descriptions were made for (a) pressure from the wife's biological time clock, (b) the need to establish one's career or to be at a place in one's education before having a child, (c) the importance of having a stable marital relationship before proceeding with starting a family, (d) the need to be financially secure before having a child, (e) the importance of establishing an occupational identity and resolving personal sex- role and individuation issues before becoming a parent, and (f) the need either to fulfill or have resolved conflicts regarding family injunctions about birthtiming.

A count of frequencies of references to these concepts was made for each husband and wife. The original model of necessary and sufficient conditions was used to understand the conceptual categories.

#### The Original Model

The original model (See Figure 1) illustrated the proposed model of necessary and sufficient conditions for a couple to proceed with having their first child after

postponing childbearing. The biological time clock was considered a necessary but not sufficient condition before the dual-career couple, who had previously delayed childbearing, would consider the next five factors which were felt to influence their birthtiming decisions: (a) role identity issues, (b) the career and educational goal status of both husband and wife, (c) the couple's financial security, and (d) the status of their marital commitment. These five factors were also proposed to be necessary but not sufficient conditions before the couple could deal with the last necessary and sufficient condition, (e) family injunctions regarding birthtiming.

#### Modified Model of Late Birthtiming

During the coding procedure for the antecedent influencing factors, a pattern began to emerge when the role identity factor was coded. In the original model, the role identity category was operationally defined as both an occupational identity (What one wants to be) and a sex- role identity (Who one is).

In nine of the 15 dual-career couples, one of the husband-wife pairs was established in occupational identity but had not resolved personal sex role identity individuation issues. Therefore, the category could not be marked as having been successfully mastered. It became apparent that these two areas of identity needed to be coded as separate categories. The occupational identity of the husband or wife was in the second group: career and educational goal

status, financial security, status of marital commitment. But sex-role identity/individuation differentiation came afterward. Furthermore, the sex-role identity/individuation condition had to be resolved in order for the husband and wife (individually) either to fulfill, disregard, or to be able to resolve the family injunctions and go on to establish their own individual messages and decisions when it was permissible to proceed with starting a family.

Therefore the model was revised to include the individuation and sex-role identity issues variable in the singular space in the model between the interrelated group and the family injunctions factor. See Figure 2 for the revised model of late birthtiming which includes the number of persons who resolved the issues in each factor.

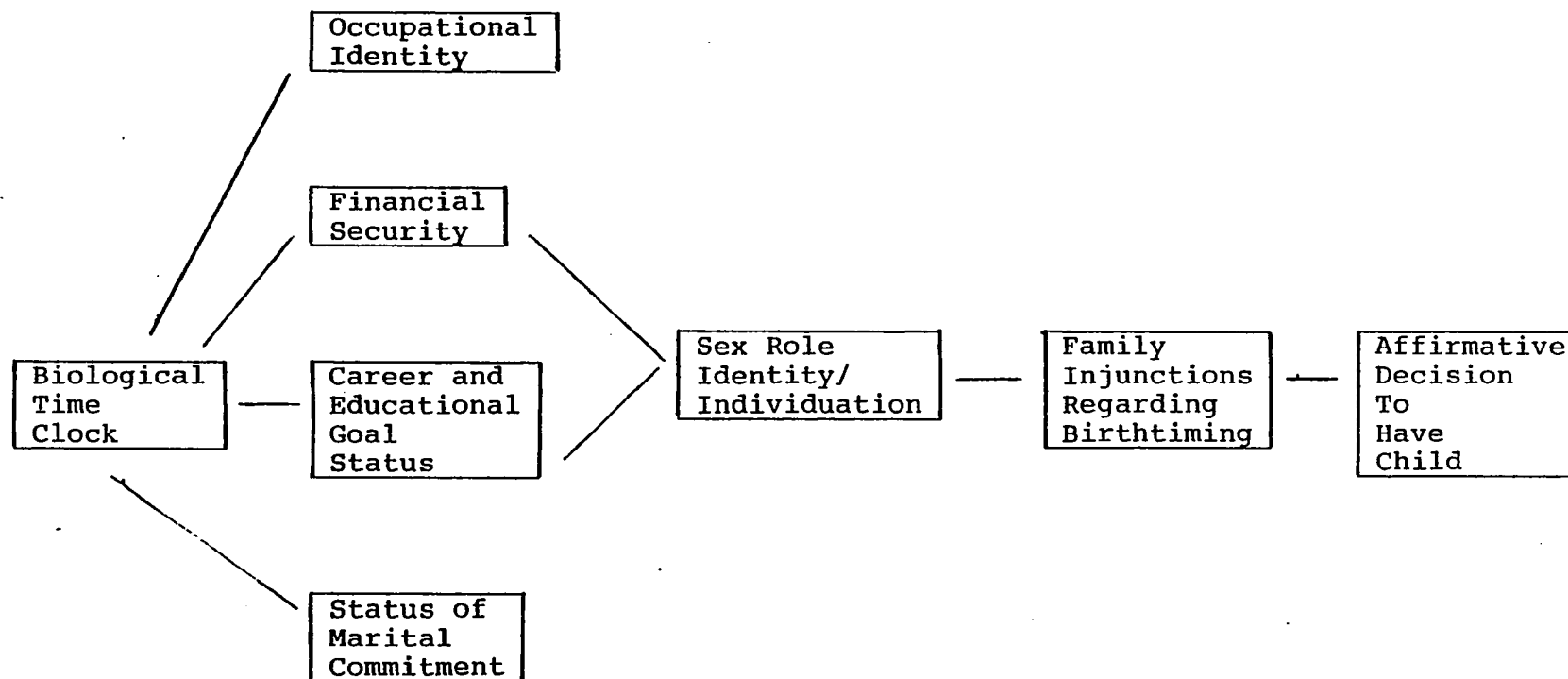


Figure 2. Modified Model of Late Birthtiming

To test the new model, cases were judged to fall within three categories: (a) having dealt successfully with all the influencing factors prior to proceeding to start their family or (b) one of the partners had unresolved sex-role identity/individuation issues prior to the conception but had consented to having a child because of pressure from their marital partner or (c) the pregnancy time table was pushed ahead because of medical problems. Cases which fell into categories (b) and (c) were considered special cases. This is illustrated in Table 9. (See also Appendix E for full quantitative summary of the model).

Table 9

<u>Number of Persons Who Fit Model of Late Birthtiming</u> <u>Categories</u>	<u>Number of Couples</u>
---	--------------------------

Successfully dealt with all issues	12
Exceptional cases with unresolved issues	2
Pregnancy time table forced ahead	1
Grand Total	15

#### Analytic Descriptions of the Antecedent Factors

##### Biological Time Clock

Biological time clock refers to the fertility deadline all women face when menstruation permanently ceases. A separate coding as described above was given to the



responses of the husband and wife regarding the time period remaining during which the wife could conceive and bear a child.

The fertility deadline of the female is a reality that each couple had to consider in making a decision about when to try to have a child. Almost every woman expressed concern around 30 years of age. For the majority of the wives interviewed, (11 out of 15 ), the biological time clock was a major factor in deciding to move ahead with starting a family. Four of the 11 wives show variations of the concern.

I was very aware that the chances of birth defects increased. The biological time clock was very important. (#1)

I didn't have that much more time to play around with, I was very conscious of that--don't put it off. (#15)

It wasn't really conscious, and then all of a sudden it was like, wow, when I got to be 30, it was like, if we're going to do this, we have to start thinking about it. And then there was no doubt that we wanted to do it and then it was just the mechanics. (#9)

I don't know, you know, you don't know exactly what the reasons are. Time --you, begin to think about time . . . . you think you should have it before you are 35 if you can. (#13)

Of the 11 women, two who had had children in their mid-thirties (#8 and #11) reported that they had been preoccupied with whether to have a child at about thirty and then "had gotten over it."

One of these wives who had her baby at age 35 years said:

I didn't feel it so much at the time, when we finally decided to have the child, as I did say at maybe at

age 29 or 30. I felt the pressure then but it went away and I didn't think about it any more. (#8)

Although the preoccupation with the biological time clock seemed to diminish for these two women, it apparently resurfaced in their mid-thirties when they proceeded to conceive. Only four women out of the 15 (#3, 5, 10, 14) did not report any concern about their biological time clock at about thirty years.

One of the women had been pushed to make a decision to proceed with attempting to conceive before she was ready because of a medical problem. Her child was born when she was 33 years old. This couple felt they would probably have waited several additional years before becoming parents if that pressure had not been present. (#5)

Another wife (#14) who was born when her own mother was 37 years old had not felt any concern at age 30 years, "It didn't occur to me."

A third woman (#3) had not wanted any children and did not see herself as ever becoming a mother. She conceived a child because of pressure from her husband who wanted to become a parent.

A female physician did not feel any concern about childbearing at 30 years.

I was confident about the scientific ways of insuring the fetus and its medical management. (#10)  
Her concern about age was in terms of how old she and her husband would be during their child's preschool and adolescent years.

Five husbands (33%) also expressed concern about their wives' fertility deadline.

Yeah, we also had to consider the time factor. (#9)

She had reached the late part of our childbearing years that is the time before amniocentesis is required. (#10)

I think her biological time clock was getting ready to ring so we made the decision. (#7)

To me, the main factor was her age, and that's what pushed us into deciding. (#12)

### Occupational Identity

In the modified model, Occupational Identity is seen as being in sequence with the other separate but interrelated conditions (career and educational goal status, financial security, and status of marital commitment). It refers to the clear sense of self in relation to what one wants to be.

Until very recently, the acceptable occupational identity for a married female was limited to the roles of wife and mother. If a wife worked, it was to supplement the family income. At this time in history, there is increasing acceptance for women to develop this aspect of the self and a social acceptance of "career" as an important role for a married women. The role of occupational identity for married males is still largely limited to job track or career expectations.

All the husbands and wives (14 men and 14 women) had resolved a sense of what they were occupationally by the time they made a decision about trying to conceive a child. One husband had changed positions (but not professions) in

order to provide more income and stability to the family because his wife planned to work part time after the birth of their child. He verbalized a preference for his earlier job by saying:

I miss it but there are other things I enjoy doing. . . . It (the new position) gives me more time to spend at home. . . so like most things in life there are minuses and pluses. . . One of minuses is loss of freedom, but that is the same with a child so I had a double loss of freedom. (#7)

Only one wife, a teacher, concerned about occupational identity expressed:

I knew I wanted to work for awhile, but I don't guess I ever thought I would work that long before I had children. . . I have been looking for another job. I'm taking some business courses, I thought I could work part time. . . I just want to stay home with her, that's the only problem. . But I don't think we'll get to that, the way things are. . the more we make, the more we spend. (#15)

This wife has a very traditional view of her role of mother as being her occupational identity. (She also received the most "traditional" score of any wife on the SRPS).

Another wife, a lawyer who continues to teach part time "to bring in a little money", has now changed to the occupational role of mother.

I felt like, OK, I've done that, now what else can I do? I also thought it wasn't enough to do that to pursue my career and do something more fancy was not going to be as fulfilling. . . which would be having a child and pulling back from a heavy duty career stream.. .So it was like in my life, I had to be somebody, before I could even think. . . . Now I'm thinking, I want to stay home and be a mother, it's real fun. This is what I want to do right now, not forever but for awhile. (#12)

For husbands, the establishment of a clear occupational sense of self was a major concern before they felt ready to start their families.

A physician commented:

Well, it seemed like a very convenient time. . . I had just gone through medical school and I got the residency and I was so preoccupied by it and on call all the time and I really felt uneasy about having a child until I could spend some time with it, sort of helping out and playing a part in raising a child. So for me, it was clearly a very good time to do it after my residency, I had come to a place in fact, I had set aside a year where it would be possible. I had finished my residency and I thought, well, I will take this year off, I won't take it off full time, but I'll work several days a week. And that would be the best time for us to have a baby. (#3)

Other husbands said:

I was still struggling as to where I was going educationally and didn't see that there could be the time sharing because if I was a parent, I wanted to be involved as much as I could be. I just felt I wasn't ready. I guess I felt as long as I was in school it was a continuation of adolescence in a way. (#4)

I had come to peace with what I wanted to do with myself occupationally, professionally and that was a big concern. (#1)

A clear sense of self in terms of occupation was also important to the wives in the sample as shown below:

A lawyer, continuing to work full time:

I think in many ways, it was even a better time for me than for him. I was made a partner and I had a really secure job situation and I think I would have been kind of paranoid unless I was a partner. I got made a partner four months before I got pregnant so that gave me a lot of time to feel really secure about that. (#3)

I think it was at a turning point in my career when I had accomplished all I wanted to do (#1).

I'm sure my parents were a big influence, and plus the fact that I wanted to accomplish some things for me, where I felt comfortable with my career . . . (#8).

I was at a point where I felt less anxious about my career and felt I could take the time (#13).

#### Financial Security

Financial security and continuation of established lifestyle refers to the couple's ability to continue their life style at the same standard of living after the birth of a child.

All the couples interviewed felt that they had wanted to be financially secure before attempting to raise a family. The range of combined salaries of the couples was from \$20,000-24,999 to \$65,000-69,999 with the majority (nine couples) falling within the \$35,000-49,999 range. Most couples felt they could have had children earlier if financial security had been the primary variable influencing their decision making.

In one case which did not fit the model, the couple had separated over the issue of having a child. After a reconciliation, their child was conceived when the husband was between jobs. His unresolved issues were expressed in this way:

I guess in some ways, I always wanted to be financially secure before I had children. Early on, coming from a relatively poor background, you want to do certain things, but that didn't prevail. (#7)

Another husband also expressed concern about financial security:

Originally, we decided we'd wait until we could afford it and then we decided we'd better have it. (The wife was 35 years when the obstetrician said she ought to go ahead if she was planning to have a child. The wife had been ready earlier to have a child and used the doctor's authority to bring about an affirmative decision regarding having a child.) (#15)

Wives also shared concerns about financial security:

Well, we just wanted to make sure we had one full salary between us. (#1)

Yeah, we were at a point where we could provide for a child adequately and that was one concern because I always felt if I ever had a child, I didn't want him to do without the basic necessities. (#8)

In my mind, the issue was not so much of my career, but the issue of financial stability plus location, knowing where we were going to be and what our financial situation was, that was really the issue in my mind, that was the most important thing. (#10)

#### Career Status or Educational Goal

Career status or educational goal status refers to completion of educational goals or career expectations set for the self prior to plans for taking on the parental role. It differs from occupational identity which is perceived as a part of the developing self--what am I?. Career or educational goal status is an external position one has

reached in one's educational or career track--where am I in my career or education? All of these dual-career men and women with the exception of one husband had come to a place in their educational or career goals where they felt established enough to be able to have the time and energy to devote to the parenthood role.

A wife who made a career change before remarrying:

I just know that, education, graduate education is always important so that was always going to be part of things and I never felt I wanted to get married and start on that (having children) before I finished my education and go off on something that I was going to do. (#13)

A female physician said:

I was just finishing my residency and it just wasn't the time, there were too many uncertainties in our life to go ahead and have a baby. We moved, I got a position, got settled, and then we decided to go ahead and start a family. (#10)

A wife gave this account:

We both went through periods of being in jobs where we weren't satisfied. The job I had before was very draining. . and I didn't have a lot of energy, but changing jobs, having a job that gives me more time off and summers off, feeling like I had the time and energy to devote to being a parent for the first time. I think until I changed jobs, I felt like I had nothing left to give. (#2)

A husband who had gone back to law school:

I had been in college for years, gone back to law school, so we decided to wait. (#6)

Another husband commented:

After my graduate work, I was anxious to get established (before having a child). (#2)



### Marital Commitment

Marital commitment refers to the propensity of the couple to stay married. This was included as an associated factor because of the high rate of marital disruption of professional couples. These couples assumed that commitment was a given, however. Nine husbands or wives commented on the quality of their marital relationship as a factor in relation to considering parenthood. The following quotations are illustrations of their responses.

Some examples from both husbands and wives are these:

As far as our marriage was concerned, after the first year of transition and stabilizing, I felt OK about that aspect. . I felt our marriage was fairly stable all along. (Husband #2)

I think our relationship is really better, we've been through some rough times and I think it made our relationship stronger. (Wife #1)

My feeling was that being newly married, you need time to establish the marriage and get it growing" (before having a child). (Wife #6 )

We talked about whether a child would affect our relationship with each other and we both agreed, it would and we had some reservations about maybe it would cause a change that would detract from . . . Yes, it has affected our relationship but not in a way that has meant trouble. (Husband #6)

### Role Identity Issues

In the revised model, the factor Sex-role Identity Issues is included in a singular space (See Figure 2). It refers to: "Who one is". Individual identity is established to the extent to which an individual feels

independent and emotionally separate from his family of origin and sufficiently identified with the parent of the same sex to take on the parental role.

Only one wife in the sample had not resolved these issues until her child was born. She is delighted with being a parent now, but was pressured into pregnancy by the desire of her husband to become a parent.

My ambivalence about having a kid had to do with feeling that a kid would drastically change my life and second; I just never had the mental image of myself as a mother . . . I didn't have the confidence that I would be competent at it and umm, I think those were the two primary reasons I was ambivalent. (#3)

The other fourteen wives in the sample had come to terms with these issues before their decision to attempt to become pregnant.

I felt I had straightened out some personal issues that my mom had not straightened out. (#1)

It had to be at point when we were feeling pretty good about where we were and who I was. (#2)

Probably my strict background was a factor in my not having children right away. . . Their view was very narrow minded. . . they are very judgmental people. And I think I have feared, I don't want to raise my child like that. And I'm sure that was part of it, it had to be. And I think I just had to come to terms with myself that it doesn't have to be that way. (#8)

I had things I wanted to do, I guess I didn't want to quit being a baby myself. . . I think that knowing in your own mind that "I can take care of myself", "I've had time" is really valuable. (#14)

The following quotation is from a wife who had originally planned to remain childless and was devoted to her career:

So I felt to myself, hey, this is really what I wanted to do, I'm really somebody. . Now what else can I do? I also thought it wasn't enough to do that, to pursue my career. It was not going to be as fulfilling as something different which would be having a child . . . and doing something more centered in your family. I really identify with this role, because this is what my mother was. She stayed at home with the kids all the time, up until I was twelve. Then when she started working, she was working out of the home. She was always there when we came home from school and everything. So I'm realizing now. . . that I have been ingrained very deeply within me, it was very subconscious, I never thought. . . but now I'm real into it and I do all these little activities with my kids and take them to the park, its like who I am, I have to be this person, and part of me I have to live out. (#12)

"Who they are" was equally important to husbands before they became fathers. Ten out of the 15 men (66%) had resolved these issues and had made a positive decision to become fathers. In addition, one man became a father because of his wife's medical condition which forced an early parenthood decision, and another who became a father because of pressure from his spouse still has not come to terms with the parenting role. Three men had not really been interested in having children, but "did it because I loved her." These men are pleased with their parental roles now. Examples are given below:

I think that's it as much as anything, who I wanted to be rather than what or where in my career. (#2)

So my own sense of who I am was . . . I had settled in my own mind who I am at this point. At 22 and 25, I still had not settled those questions. . . I think that is critical, I think it would be crazy to have a child when you're not sure who you are. (#4)

Maturity is very important and I would have never considered having a child before. I just know I would not have been ready to do it . . . But if you're insecure yourself, having real identity problems, you are totally insecure in your job and you get frustrated... I don't know how you can possibly take care of children . . . I don't think that having a kid this year or two years later. . to me, that's not as critical as one's own sense of security and establishing your identity and personal maturity is the most critical factor. I believe you have to spend sometime getting to be yourself, and if you don't do it when you're young, you will do it at some point. I think everybody's got to be themselves for while (before having children) and after being somebody's kid and somebody's husband or wife, you're never you. (#14)

#### Family Injunctions

Family Injunctions refers to those family messages about birthtiming incorporated by the individuals into their conscious life plans which influence and makes predictable the rest of their lives (Steiner, 1974). These may be explicit or implicit. The family messages incorporated by the husbands and wives were primarily implicit; that is they were sensed or observed and unspoken messages. (See Table 10). Nonetheless, they had an impact on the childbearing decisions of these couples as evidenced by their verbalizations. These family messages fall into nine categories which are not mutually exclusive.

Table 10

## Family Injunctions by Categories

Be established in your career first	5
Live a little first	2
Become mature first	7
Be certain of the stability of marriage	4
Be financially secure first	7
It's OK to have a child after 30 years (wife)	2
Complete your education first	5
To have a child means I'll be a parent like my own parents	1
Children are a burden	1
Total	31

Twenty-three (80%) of the husbands and wives talked about unspoken family messages which influenced their birthtiming. The following quotations were selected from cases for the purposes of illustration.

A female television journalist:

She (my mother) wanted to be a nurse but her mother wouldn't let her. . . but she would probably would have been a career person and would have delayed childbearing if she could have gotten a career that she had chosen for herself. It was unspoken. . . not are you going to college; but where are you going and not if you were going to have a job but you are going to have a job . (#6)

The message received by this woman was that she should choose to develop herself in a career of her choice and get a job in that area before having children.

A father who returned to school to become a lawyer described his family injunction this way:

My father died when I was eleven. He had very little education. He used to urge me to get an education. . . . I guess recognizing a sense of loss and deciding if anything was going to

happen. . . in one sense it was a strong incentive to find a better way of doing things. Life was hard in the mountains. (#6)

This husband's implicit message was to get as much education as possible before having a child. He finished law school at 40 and then decided to try to have a child.

A wife who continues to practice law said:

Well, I wasn't born until my mother was 26 and back then that was real late. I mean I never got the sense from my mother certainly, that having kids was something you do in your early twenties at all. If anything, I would have gotten a lot more motivation to get my career in order from her. I don't think she ever said it. . . I mean, the fact that she waited until she was 26 must have had an impact on me and my best friend growing up was also a first child and was born when her mother was 29 or 30. (#3)

This woman received the implicit message that she should get her career in order before she had children. This woman was pressured to have a child after she became a partner in her law firm and said she felt becoming a partner had made it possible for her to proceed to try to get pregnant.

This selection is from a husband who had not been sure he wanted children but who agreed to having a child when his wife finished her doctoral degree and had a job as a biostatistician:

Well, I think the other thing that delayed us was our families. We both had in common, the impression that our mothers would have been happier if they had had careers. (#1)

The message he had received was that a wife should establish her career before she had children if she wanted to be happy.

A psychologist who is now working part time and spending half of her time with her preschool child said:

My family's expectations were very explicit,  
I knew what was expected. (#7)

Although this career woman, a psychologist, defined her family expectations as being explicit, the message was actually implicit. Her mother, who was a career woman all her life was 30 when this woman was born. Her parents were divorced when she was a young child. The implicit message was: Be a career woman, finish your education and it is permissible to have children after you are 30.

A father comments:

I think there was some sort of norm . . . a strong norm in my family of independence and self sufficiency. I had lived alone for 5-6 years. . . I guess that indirectly related to having children, or directly. (#2)

His message was: Be autonomous before you have children.

A father who is currently finishing his doctoral degree as well as working full time told this:

My dad believes in the work ethic and when I was 13 years old, I was delivering newspapers, mowing yards and saving money and not being frivolous with money. . . Even though I feel fairly safe and solid, I'm still driven to save. (#4)

His implicit message was: Be financially secure before having children. This message came out in other cases also.

Sometimes a husband and wife shared the same implicit family message to be financially secure as in this case.

The wife said it this way:

Mom had a pretty rough life, she never gave it to me directly but I observed and it was not easy for her. It made me very aware of the need for financial security or be assured that I was never in need. . . financial security became a big thing for me. With the kids, she taught me to work, to do well, going to graduate school. . . No one in my family had ever been to graduate school. Those things were of utmost importance to me. Mother was really pleased to see me do well at work. (#5)

Her husband said:

The only thing I remember, that . . . . . doesn't have any psychological effect on me, I think she was always kidding about not wanting to become a grandmother, I noted. I think it had some subliminal effect, she worked very hard for us, she worked all the time. There were six of us and we had kind of a love, my father was a butcher, low income, struggling all the time. She really had to struggle and I think, thinking of her plight with us in the sense that is something I certainly would not want repeated in my family. (#5)

Both husband and wife had received the message: Be sure to you are financially secure before you have children or you may have to struggle.

Explicit family messages usually conveyed feelings about the restrictions imposed by parenthood as illustrated by these selections.

A husband comments:

That was one thing I remember hearing from them, is that when you get married, you need to have some time to do what you want



to do and get to know one another and have some good times together before you start having kids. (#14)

This quotation is from a wife who had made lists of things she wanted to do before she had children.

My parents married young and had children young and something they verbalized a lot when I was grown was I would go to college and have a job and wait until I had sort of lived some before I got married and had children. That's not something I consciously thought about but I'm sure that it influenced my values a lot. (#2)

This is from a wife who had initially not planned to have children.

I remember my mother complaining about what a burden it was working and having a family and what a jerk I was. (#14)

This woman received the message from her mother that if you worked, having a child was an interference and a burden.

### Peer Influence

Coding of the transcripts revealed an eighth influencing variable which had not been accounted for in the original model. Fourteen husbands and wives indicated that the influence of their peer group had had considerable effect on the timing of their childbearing decisions. This included the influence of peers beginning to have children as well as the effect of a their childless peer group on their original reluctance to start a family.

Seven of the 30 husbands and wives reported feeling the negative influence of childless peers or having made

negative evaluations of peers' or siblings' experiences with their children.

A husband who is now a devoted father and advocate of family life said:

Her sister had children, family people had children. But nobody we identified with had children. And all we were hearing were negative things about children. (This couple proceeded to have their first child when the wife was 33 because of a medical problem associated with the use of the birth control pill. (#5)

His wife commented:

We were enjoying our careers playing around and traveling. We were socially active and a lot of the people we were active with didn't have children. We were reluctant in some respect to have kids. . . . In the (my) mid-twenties, I enjoyed my freedom, and we had good friends, only one couple who had kids, and a very active life . . . and I didn't really want to give up my freedom . . . We were the last to have kids. (#5)

Another husband commented:

I guess it was just the nature of the times and the people we were with, the eternal youth of graduate school and everything. We just never talked much about having children, whether we would have them or not. . . . In our age range, people we went to undergraduate school with, graduate school, and have stayed friends with, most cases these people are dead set against children. . . . and most of the people around you aren't married, or at least tend to be in the minority. . . . so it wasn't like we were being exposed to families. (#9)

Seven of the 30 husbands and wives commented that they felt a positive pressure to become a parent as their cohorts began having children.

In one case, a female peer suggested to the dual-career wife that she was going to try to have a baby, and why didn't they do it together.

The husband told it this way:

Her workout friend decided she wanted to have a baby and she talked my wife into having it. (#14)

His wife agreed:

She started talking to me about a year before, saying she was going to get pregnant and have a baby, and why didn't I do it too, because it would be fun to do it together. And it just seemed like a good idea to do it that way. That was the thing that really made it happen at a particular time. . We were headed in that direction, but that (her friend's urging) was the thing that made the decision at a particular time so that she and I could be pregnant together. . I don't know if it hadn't been for her what would have happened. (#14)

Another husband observed:

How about peer pressure? Because it seemed like in a span of a few years all of our friends were having kids. You're more aware of it. When you associate with people, for the most part, peers who don't have children, it's just not something that you talk about or are aware of that much. When your very good friends start having children, it's the main thing in their lives, and half of what is talked about is that, so something becomes a significant issue. That was true with us, I didn't feel any pressure, I didn't feel pushed about it, but it's just something that suddenly is something you're more aware of. It was hard to ignore, it's hard to say let's have children, let's not even think about it. A lot of people close to us were talking about it a lot, because most of those people put off the decision until pretty late themselves. So I think that's a factor that had something to do with us having children. If you live in isolation and you don't know people who have children there's not as much reason for you to talk about it and decide. (#12)

His wife added:

I remember when Anna got pregnant. I remember consciously thinking, Hey Anna's pregnant, now I can do anything. . . that kind of made me want to be pregnant more. It was kind of like everyone was doing it. . . I'm sure it did have an effect. .  
(#12)

Another mother said:

....because all our friends were having children, and seeing them have kids, and feeling like,--well, we can do that as well, if they can do it, we can do it. (#2)

### Eternity Issues

Although eternity issues were not proposed as a factor, six husbands and seven wives mentioned issues related to their own mortality as important to their decision to have children. Several felt that this was even more important to them after their child was born. This could also be interpreted as concern about generativity within Erikson's developmental framework.

A mother who says she is very conservative financially commented:

Had we not had J., I think I would have said, hey, let's go to Europe six times a year. There would be nothing to save money for; there is nothing to collect possessions for if not to pass on. I came from a strong tradition, from a family that passed along things. I have things my great grandmother passed along. And the stories I can pass along. They are not extremely valuable, but they are sentimental to me now, so there was this idea of continuity. (#6)

Another mother said:

. . . it seemed to give life more meaning . . .  
It was my sense of passing things on--things I

had gotten from my grandmother to give to them . . . tell stories about their grandparents and stuff. (#9)

A husband puts it less in terms of passing on possessions and more in terms of his own issues with mortality.

I have a really personal sense of myself, this sort of mortality and children help you deal with that, creating someone in your own image, and I think that was one of the biggest motivators. (#2)

One husband and wife felt the issue of eternity and growing old without family was the most influential factor in their decision to have child. The wife in this couple had planned to remain childless until this experience.

Well, I think the thing that pushed us over the edge was at Christmas at your mother's, there were three older couples there, in their sixties and seventies and none of the three couples had any children. . We were talking between the two of us about the fact that they are here because they have no place to go, they don't have family, they don't have children, they had no traditions. And we just started talking from there, and decided that we wanted to build our own traditions, we wanted to have children. (#8)

Her husband said:

As you go through life, you acquire things, and you're not going to take it with you, so what are you going to do with it? We thought before that we were missing something if you didn't have a child. . .it's a little more of a purpose for life. (#8)

One husband's Jewish heritage was important to him in deciding to have children.

To begin with, the Jews were very threatened. . We're not even replacing ourselves now. . . Tied with the responsibility of being a Rabbi, combined

with the fact that the holocaust took one third of the Jewish population, I felt a responsibility to have kids. (#10)

One husband sees it in a historical perspective this way:

It had something to do with my decision, people have been having children for thousands of years, who am I to say that it is not the right thing to do? It's a part of my life that I would be missing, it's an experience of people for generations and generations. (#12)

Enhanced concern about one's mortality after becoming a parent was expressed by some of the sample.

One husband remarked:

You have much more of purpose in life, before, I think we had a lot of small or large purposes. And I think it makes you much more aware of your mortality. We talked about the fact that suddenly you become very aware that if something happened to you, it would be a very severe problem on who is left behind. You become much more aware of your mortality. (#8)

His wife shared the feeling too.

Yeah, after we had him, I think we had a sense of fulfillment in our own personal lives. He added that little something extra that gives us that desire to keep going and all of a sudden, just getting up; in the morning and going to work isn't the main; he's the main reason we get up now. (#8)

Another mother described how it changed her attitude toward her career this way:

I think having a kid puts other things in perspective. I mean, you know if you're worried about your child, who cares about what's happening in your career . . . I spend less hours working and it is less important, and I travel less and all kinds of other things that hurt my likelihood of being the biggest trial lawyer in the state. But I don't really care any more. (#3)

Thirteen wives and 11 husbands had successfully dealt with the associated factors before making an affirmative decision to have a child. Two of the thirteen wives had originally not wanted to have children and had become preoccupied with whether to have a child about 30 years of age but had decided against becoming a parent only to have the decision resurface later. These two wives had their first child at 35 and 37 years. (#8 and #11.)

#### Sex-role Preferences Scores Compared With Interview Data

An assumption had been made that these couples would have modern sex-role attitudes which would have influenced their delayed fertility pattern. Indeed, two thirds of the wives and over half of the husbands held modern sex-role attitudes. However, 33% of the wives and 47% of the husbands who had delayed childbearing were "traditional" in their sex-role attitudes and preferences. There was some indication that one of the "traditional" wives had been more "modern" prior to becoming a parent.

One mother who had one of the most "traditional" scores said about herself in her last year of college:

I actually used to have nightmares about this, that I just married. . . that I got lost in the suburbs, nobody could even find you. . . I didn't want to get married and go live in one of the suburbs and just be a housewife. So part of going to graduate school (was) an escape. . . I think a lot of it too was that I just didn't like the choices . . . This is odd to say because in many ways I'm, we have a very traditional family, I like staying home, I like staying with my kids. But what I have now is very different from what I thought I would be moving into if I had done that,

or gotten married after college or soon after and stayed on the west coast. (#9)

The fact that this is a retrospective study may have influenced some couples' scores on the Sex-role Preference Scale in a more traditional direction. They might have had more "modern" scores before they became parents.

This wife who had the highest "modern" score of any wife on the SRPS, eloquently describes the process of her emotional shift to a very traditional position after the birth of her second child.

And now I'm thinking geez, I really want to stay home and be a mother, it's real fun. This is what I want to do right now. Not forever, but for awhile, this is like, I really can identify with this role because this is what my mother was. She stayed home with the kids all the time, up until I was 12. That's all she did, she never worked. Then when she did start working she worked out of the home, so it wasn't like she went away to a job; she was always there when we came home from school and everything. So I'm realizing now, just in the last year that I have been ingrained very deeply, within me; it was very subconscious. I never thought, but now I'm real into, I do all these little activities with my kids, and take them to the park, it's like who I am, I have to be this person, and part of me, I have to live it out. (#12)

In some instances, there appears to be a discrepancy between the marked responses to the SRPS and the actual sex-role activities practiced by the respondents.

These comments are from the husband with the most "traditional" score of any husband in the sample. However, in actuality, he is behaviorally and attitudinally a very "modern" husband in his sharing of responsibility for caring for his 18-month-old son:



I would say that she deals with roughly two thirds of his needs, and I deal with roughly a third. . . I can't see how people make it where the husband doesn't help. . . We split our time with him, and that's nice, because that way someone is, if they are gone for a week doesn't have to take the entire week off. We can take two and three days whatever, to work it out. . And I think it's good to be alone with him. I think you can better appreciate him and understand him if you've got him alone to deal with for the day, or whatever, I really do. (#8)

His wife who scored "modern" said:

And I think one thing that helped me decide, too, that I was ready, was that I felt that my husband would be a supportive parent, who would help me as far as the domestic chores that had to be done, I simply do not see how working mothers who have a child do it if they don't have a husband who helps out around the house, because even with the two of us, we still stay overwhelmed. (#8)

#### Discussion of the Fertility Decision

Rindfuss, Bumpass and St. John (1980) proposed that pronatal pressure from friends and family diminishes as the couple grows older. This would suggest that older dual-career couples would be less subjected to social pressures which influence younger couples to have children. However, peer and social pressure did affect 17 subjects in this study (See Appendix E).

Analysis of the interview data from these dual-career couples revealed that the social influences both to delay childbearing and then to proceed with attempting a pregnancy were provided by the cohort group of dual-career couples.

In two cases, female friends served as positive role models. And in one instance, the husband suggested that the couple

had not been "quite ready to have a baby yet" when the wife's close friend invited her to join in trying to become pregnant at the same time so they could share the experience.

Even as late as 1980, Veevers, who developed a model for childlessness, predicted that women who had reached the age of 30 years without having children were unlikely ever to do so, particularly if they had been married over five years. However, the Veevers prediction is not borne out in this study. Although this sample is very small (and therefore generalizations cannot be made), all of these women were at least 30 years old when they had their first child (ranges in ages were 30 to 37 years) and the median duration of marriage was six years. This research would suggest that the earlier model of childlessness developed by Veevers may need to be reexamined in light of the current cohort influence suggested by this study as well as the recent increase in first births after 30 years (Baldwin & Nord, 1984).

Blake's (1979) finding that men were significantly more likely to regard childlessness as disadvantageous suggested that the husbands in the dual-career couples studied would be more likely to raise the issue of parenthood and would have more power to control the fertility decision.

Contrary to Blake's findings, only three out of the 15 or 20% of the husbands interviewed for this study were ready to have a child before their wives were. Only one husband

insisted that his wife agree to have a child, although she had intended to remain childless. In fact, slightly more than half of the wives in the study were ready to have a child before their husbands were and had either waited for their husbands to agree to have a child or insisted that they try to become pregnant. One wife insisted on having a child as a basis for continuing in the marital relationship. For the other twelve couples, there was a mutual agreement from the beginning of their marriage.

Only four wives and two husbands had planned to remain childless. The other eleven wives said they had all planned to have children at some future point in their marriages. Nine husbands had definitely wanted children, four had "gone along" with their wives with no particularly strong inclination either way, and two had definitely felt they had wanted to remain childless.

The decision to marry and remain childless may have become a less deviant family form in the last ten years, but the normative societal expectation that if one is married, one will eventually have children remains pervasive. While the decision to have children and when to have them is a very personal and individual decision, it appears to be made either consciously or unconsciously under societal pressure.

This study proposed that since dual-career couples would probably have adopted modern sex-role attitudes toward marriage and the family, having children would no longer be an issue of society's expectations for procreation. Instead

it was whether they chose to have children at all or felt the need for the identity of parenthood. Some of the sample couples volunteered statements which may provide some understanding of the subjective aspects of society's pressure to have children.

One wife said:

I had always seen myself as married with two kids, a boy and a girl. (#6)

Because of the pressure of her career and her age, she has decided to have only one child, modifying her parental image of herself somewhat.

One husband said:

I was cognitively ready. I knew why I wanted to have children. I knew in terms of the world, intellectual, familial, grandparent issues, that I wanted to have children. . . .The "ought" was very important. (#10)

This is from a wife whose husband is trying to convince her to have a third child.

I don't know exactly where the interest came from other than probably just deciding that you want it to be a part of your life. We both came from families where there were three children, and I think that has something to do with deciding that you want to have children. (#13)

These comments are from fathers.

I just never thought, it just seemed the natural thing to do . . . It's kind of a philosophical perspective that you assume that the world is going to continue to be a positive place. That the world is going on . . . That you believe in humankind. (#4)

This is really a life experience I wanted to be included in . . . a unique life experience, I didn't want to miss. I wanted to take part in that

experience, live that experience because I thought I could contribute something different which other people couldn't do. I always figured I'd be a good parent. (#3)

Only two couples said they had made a joint decision, implying they were ready to take on the role of parenthood at the same time. This study suggests that the timing of the fertility decision is an individual one and that the husband or wife who is ready to become a parent first waits until his or her partner is ready or negotiates with the other to adopt his viewpoint.

#### Implications from Previous Research

Broderick (1971) suggested that by using more than one theory in framing hypotheses and interpreting results, a fuller understanding of family and marital behavior might be achieved. Thus, several theoretical perspectives brought to bear on a special family or marital topic can possibly yield different though complementary insights into unexplored areas. Together, these varied perspectives provide a greater flexibility in approaching this unexplored area of decision making of dual-career couples who have chosen to delay childbearing until the wife is 30 years old or older.

#### Issues Related to Old Age or Eternity

In previous research, the desire for a close loving relationship was found to be one of the most frequent reasons given for wanting a child (Beckman, 1978; Hoffman & Hoffman, 1973; Towner, Beach, Campbell & Martin, 1976). None of the 30 dual-career parents interviewed introduced

this as a motivation for deciding to have a family after delaying childbearing. It was mentioned as something that enhanced their lives after the birth of their children but not something they had considered before.

Historically, children have been seen as a source of support and a way to avoid loneliness in old age (Blake, 1979; Laucks, 1981). Two dual-career parents identified support as an influencing factor in their decision to have children. Others described it as an issue related to their own mortality and a need to feel they had contributed something to the next generation by passing on family history, folk tales, and heirlooms.

#### Adult Developmental Theories

Stages in adult development may need to be reexamined in light of the findings from the present study. It appears that "identity" has two components: "occupational" and "sex-role" and that these identities do not occur at the same time. In fact, in these 30 dual-career men and women, the "occupational" component of their identities was established in all cases, while the issues related to identification with the parenting role and separation from one's family of origin was associated with delaying a positive decision to try to have a child.

Levinson's study of life-span development of men (1978) identified age 30 as an age at which men typically focus on re-evaluating their commitments and become more family oriented. This would have suggested that the

decision of these dual-career couples might have been influenced by the age-related stage (30 years). None of the career men and only one career woman verbalized a desire at that point in their lives to become more family oriented.

Stewart (1977) applied Levinson's framework to a study of eleven women. The results supported Levinson's theory of age-related stages but revealed greater variations in women. No research has included both men and women in the study of adult development and the marital couple has not been included as a unit.

Research by Constantinople (1969), Gilligan (1982), and Hodgson & Fischer (1979) suggested that the stages of identity and intimacy seem to be reversed for women within the Eriksonian developmental framework. This finding was supported by Sangiuliano (1978) who also found that identity issues frequently emerged at middle age.

Previous research does not differentiate occupational identity from sex-role identity and individuation issues. When these are viewed separately as in the model developed from this study, identity and intimacy appear to be reversed. All subjects reported a satisfactory marital relationship prior to identifying with the role of parenthood. Unless the issues of sex-role identity are dealt with successfully, one cannot deal with the issues of generativity.

In addition to the reversal of identity and intimacy, there appears to be a pattern of occupational identity being

established prior to establishment of identification with the parenting role. The data from analysis of the interviews with this group of 30 dual-career persons indicates that although all had established an occupational identity prior to considering parenthood, if either the husband or wife had unresolved sex-role identity or individuation issues, the couple did not proceed to make an affirmative decision to have their first child even when feeling pressure from the woman's biological time clock. When these sex-role identity or individuation issues were resolved, the couple would move ahead to attempt a pregnancy.

Fabe and Wikler (1979) found that women who had experienced an unpleasant childhood were more likely to remain childless. One dual-career mother spoke of her own childhood as being one she did not wish to replicate and revealed she had been able to consider having a child only after she observed the loving relationship between her husband and his parents and realized that she could be a different kind of parent. Here the concern seemed to be that identification with parents perceived as "bad parenters" made that role an unacceptable option until these issues were resolved. Another dual-career mother had a child after she had dealt with some of her negative feelings about her mother in psychotherapy.



### Model of Childlessness

Some researchers (Veevers, 1980; Poston & Gotard, 1977) predicted that women who had reached the age of 30 without having children were unlikely ever to do so, particularly if they had been married over five years. DeJong and Sell (1977) suggested that as time passed, a woman would find it increasingly difficult to resolve value conflicts in favor of childbearing.

Rindfuss, Bumpass and St. John (1980) found that pronatal pressure from family and friends diminished as the couple grew older so the mature couples were less subjected to the social forces influencing many younger couples to have children. Considering these correlates of childlessness, it could be predicted that many professional women and their husbands would not have children (Veevers, 1980). Yet, the majority of this admittedly small sample of 30 dual-career professional men and women had been married over five years, were all over 30 years of age, and still chose to become parents. This exploratory study suggests that the previous model of childlessness may need revision in light of the current dramatic increase in births to women age 30 years and older.

### Social Exchange Theory

Beckman (1978) studied the decision making of working women in relation to the desire for additional children with employment being the competing role within the theoretical framework of social exchange theory. She found that

neither employment intentions nor satisfactions with employment affected the desire for children. But the value of parenthood did influence intentions regarding employment.

Beach, Campbell and Townes (1979) developed a model for fertility decision making based on social exchange theory. The model posited that individuals consider the available choices and select alternatives which they believe will provide them with the best outcome.

In the present study, three dual-career parents discussed their desire to have more children but said they had decided to limit their family size to one child in two cases and possibly two children in the third because they did not feel they had the extra time and energy to give to another child and maintain their careers. Therefore, the competing role of employment influenced the decision to limit the family size of two women and one man who had carried a primary childcare role with his daughter. The social exchange theory model seems more applicable for these families when additional children are considered than in relation to the decision to have their first child after delaying childbearing.

Research of Beckman (1978) and Beach et al. (1979) on fertility decision making focused on the individual. This study attempted to examine the fertility decision-making of these dual-career couples as a unit. The findings suggest that the decision to have a child is an individual decision. Only two of the dual-career couples stated that they had

made the decision together and had been ready at the same time to proceed to try to have a child after postponing childbearing.

Blake (1979), in her study of attitudes toward childlessness in the United States, found that children were viewed as socially instrumental particularly for persons of lower socioeconomic status. This suggested that dual-career couples who are at a higher SES would find children of lower social value and that the opportunity costs would be much higher, particularly for the dual-career wife. It would follow then, that the dual-career women in the sample would have more reluctance to have a child and be less likely to raise the issue of having a child.

In this sample, childbearing was delayed for seven couples because of the initial reluctance or lack of readiness of the husbands compared to four couples who delayed due to the wife's unreadiness or unwillingness to have a child. So in spite of costs which would seem to be higher for the dual-career wives in this study, the women more often than the men desired to have a child.

It seems clear that a strict social exchange theory model alone would not explain the choice of these dual-career persons to proceed with having their first child when the wife is 30 years old or older after delaying childbearing. Although the majority of these marriages were egalitarian with husbands sharing a "modern" sex-role preference and attitudes and willing to share equally in the

childcare roles, the physical aspects of bearing a child remain more costly to the woman, i.e., the tiredness, awkwardness, weight gain during pregnancy, and nursing.

For both the husband and wife who are actively engaged in pursuing careers, having a child is very costly both in terms of long term monetary expense and time expenditure. What is so compelling then that motivates these couples to have children at a later age that balances such heavy costs?

#### Role Strain

Goode's theoretical model of role strain was applied to these subjects. Goode defined this factor as the "felt difficulty in fulfilling role obligations" (1960). It is the stress generated within persons when they either cannot comply or have difficulty complying with the expectations of a role or set of roles. Anticipation of role strain appears to have been a factor in the decision to delay childbearing in this sample of dual-career couples. Waiting until they were at a better place in their career was most often mentioned by the wives as an important factor in their delayed childbearing.

#### Norms Influencing Late Birthtiming

Neugarten, Moore, & Lowe (1965) proposed that adults experience stress as a result of "being off time" in relation to societal age norms for behavior. Their findings suggest that the stress of feeling "off time" in relation to the parenthood role might influence the dual-career couples in this study to proceed with having their first child after

postponing childbearing. The influence of their cohort group both to remain childless and later to proceed with starting a family may be indicative that the persons in this unique sample have established their own age norms for their cohort group. Analysis of the data suggests that late birthtiming has reflected the "norm" of these dual-career couples. For almost half of the sample, first there was a "norm of childlessness" among their cohort group of dual-career couples. Then, as their cohorts proceeded to have their first children, the norm shifted, and a couple might have felt "off time" if they remained childless and thus feel pressure to make an affirmative decision to try to have a child.

#### Societal Expectations for Parent Role

With both men and women adopting modern sex-role attitudes toward marriage and the family, it was proposed that it would no longer be an issue of having children because "one should" but rather whether these "modern" dual-career persons wanted children at all or felt the need for the role of parenthood.

LaRossa (1981) pointed out that parenthood still is not a freely chosen career. For the majority of these 30 dual-career persons, having a child was an expectation they intended to fulfill eventually. It was just a matter of timing when the event would take place. Only four of the dual-career persons stated that they had definitely never wanted to have a child. Some men did not feel any

particular pressure or longing to have a child but did it "because it was important to my wife and I love her."

For some, the opportunity to experience the role of parenthood was a very strong impetus for becoming a parent. One dual-career wife who had become preoccupied with indecision about becoming a parent at about the age of 30 and "got over it" went ahead to become pregnant at 37 with her first child, because "if I was ever going to do it, it was my last chance." A father who was a pediatrician felt it was a life experience he wanted to take part in and did not want to miss. He saw himself as having the potential for being a good parent which he wanted to actualize.

The results of this study suggest that there is still a predominant existence of childbearing norms and strong reinforcing social sanctions to have a child if one is married. The reference group support of childless peers appears to be a salient factor encouraging delay which then shifts to a norm encouraging taking on the role of parenthood as more and more of the childless peers become parents themselves.

It appears that family injunctions regarding timing of childbearing and the establishment of a sex-role identity with the parent of the same sex and individuation from one's family of origin are particularly salient factors in the parenthood timing of these 30 dual-career persons.

### Analytic Inductive Process

Qualitative methodology was chosen as the research method for this study of the birthtiming decision making processes of these dual-career couples. It served as the basis for entering their worlds, and obtaining a "living description" of these processes which served as the basis for the development, testing, and definition of the hypotheses and the model which emerged. The model is a concrete illustration of the working hypothesis. It is used to check against the previous observations forming the basis for analytic inductive analysis of the data.

The original model was developed from a preliminary analysis of initial data obtained from interviewing two dual-career couples who met the research criteria. Additional influencing factors which emerged from the first interview were reformulated and included with the first set of influencing factors thought to influence the decision making processes prior to collection of data from the first couple to form the first working hypothesis.

After interview data from a second couple were analyzed, a model was developed which included the following factors as influencing the couples' birthtiming decision:

- (a) Biological time clock of the wife, (b) Career status or educational goal attainment, (c) Sex-role Identity Issues
- (d) Financial security and continuation of established lifestyle, (e) Marital commitment, and (f) Family

Injunctions. This model was tested against the interview data from an additional 26 career men and women.

Only four spouses were an exception to the general model. However, their being in the study helps to clarify factors associated with later birthtiming decisions even more. There were two couples (#3 and #7) in which the wife of one couple and the husband of another couple continued to feel negatively about having a child and had only become a parent because of pressure from their respective spouses.

The wife whose ambivalence about becoming a parent was resolved when her child was born said:

I just never had the mental image of myself as a mother . . . I didn't have the confidence that I would be competent at it. (#3)

This couple had been together for over nine years when the stability of the relationship was threatened by the wife's refusal to have a child. She would like another child, but her husband who had originally wanted two children now feels "they are too much work."

The husband's reluctance to have a child caused a brief marital separation between one couple (#7). The wife insisted on having a child as a condition for reconciliation. Having a child necessitated a change of professional position by the husband in order to ensure a stable income. The new position holds less interest for him. When asked if he was satisfied about his decision to leave his previous position, he said:



No, I miss it . . . Like all things in life there are pluses and minuses. Right now there seem to be more pluses. One of the minuses is loss of freedom, but that is the same with a child, so I have had a double loss of freedom. (#7)

His statement is contradictory. He says he misses his old position but that there are more pluses right now. His comments about their child (who was 18 months old at the time of the study suggest that his role identity issues have not been resolved and that he is not entirely pleased with his new role of father. The wife in this case, however, is pleased with being a mother and practicing her profession part time.

The other two spouses (Couple #5) had a child earlier than they intended because of the wife's medical problem which had been exacerbated by use of the birth control pill.

In the final coding of the interview data, the factor designated Sex-role Identity Issues was identified as one which was difficult to code because part of the issues involved (Occupational Identity) tended to have been dealt with by the individuals and yet another part (the Sex-role Identity/Individual Identity) remained unresolved. Therefore, the model was revised to include the Sex-role/Individual Identity Issues factor in the singular space in the model previously occupied by the Family Injunction factor as illustrated in Figure 2.

This model was then tested against all the cases again. Analysis of the study data confirmed that the wife's biological time clock, the career status or education goal

attainment, financial security, marital commitment, occupational identity, sex-role/individual identity issues and family injunctions as factors associated with the late birthtiming decisions of these 30 dual-career men and women.

A Symbolic Interaction framework defines the best way to understand human behavior is to deal with the meanings and values that occur in the minds of people "because that is the direct cause of behavior." In qualitative research, one gets "inside" people's lives in order to understand their world as they see it. The present research demonstrates the merits of qualitative methodology and illustrates some of its advantages over quantitative methodology. One example is that the scores on the objective SRPS did not coincide with what the couples actually said in their interviews.

The methodology's shortcoming is that it illustrates only the existence of relationships between the factors associated with the late birthtiming decision. Further research is needed to specify the amount of influence (amount of variation explained in the independent variable) of each of the factors associated with the late birthtiming decision depicted in the model.

## CHAPTER IV

### SUMMARY AND CONCLUSIONS

At the present time, American society is changing in ways that will probably influence more women to postpone childbearing. Among these changes are increasing levels of education, and better opportunities for them in the labor force. In the past, men and women finished their education before they got married and began to work. Many women worked before they married but stopped altogether once they married and began childbearing or only returned to work later to supplement family income. Now the majority of women expect to work until retirement age with only brief interruptions for childbirth. Many women are evidently postponing the added responsibility of a child while they invest in educational and employment opportunities and then become established in a long-term career.

Increasing attention is being focused on dual-career couples who are having their first child at a "later age." The birth rate is up sharply among women 30 years old and older, as many are choosing to pursue and establish careers

in early adulthood and are electing to delay childbirth until their later reproductive years.

Between 1970 and 1980, the rate of first births for women aged 30 to 34 rose by 75% from 7.3 to 12.8 per 1,000 women. The number of first births to women of this age went up 166%, from 42,404 to 112,964. The birth rate and numbers also increased for women 35-39 years and 40 and older. Half of the married women who had a first birth at age 30 or older in 1980 held a professional job in the year before the birth (Baldwin & Nord, 1984).

Yet there is little to no research investigating the factors influencing the decisions of these career women and their husbands to become midlife progenitors and the consequences of these decisions for themselves, their families, and society. Almost all studies on birthtiming are concerned with the effects of early first births and the consequences of the number of children a woman bears.

The purpose of this study was to identify the salient factors associated with the decision of dual-career couples to become parents after postponing childbearing until the wife was 30 years or older, which would provide an understanding of the decision-making processes of these late birthtiming couples. The meanings, motives, and emotions which influenced these dual-career couples' decision to become parents after postponing childbearing until the wife was 30 years old or older were viewed as a potentially

important contribution to the literature of marriage and the family.

The sample of this study consisted of 30 dual-career men and women (15 couples) from the Piedmont area of North Carolina. The couples had to have postponed childbearing until the wife was 30 years old or older and had to have been married at least two years before the birth of their child. A snowball technique was used for obtaining the sample. All couples contacted agreed to participate in the study.

Since this exploratory study sought to understand the unknown properties of these dual-career families, a research methodology was required which would examine in depth a small number of cases in search of influencing factors and which could tap the socially constituted real worlds of these dual-career couples which served as the basis for their individual actions and the decision-making processes about birthtiming. A qualitative methodology using intensive interviewing and an analytic inductive method was used to examine data from conjoint interviews with the dual-career couples (Becker, 1970; Cressey, 1953; Lindesmith, 1974). This method seeks discovery of relationships through analysis of data provided by the interviews and constant testing of that data against the patterns and explanations emerging from each case.

Because there was little literature published about such couples, information was obtained from preliminary

interviews with several couples who fit the research criteria. These interviews were tape recorded and later transcribed verbatim. The typed transcripts were analyzed to determine descriptive findings, categories or related concepts, and emerging patterns. Each case transcript was read and coded for the associated factors across the model, and a judgement was made as to whether it fit the model.

This analysis revealed factors which were hypothesized to influence these dual-career persons' decision to have children after postponing childbearing. After each interview, the hypothesis was reformulated to include additional influencing factors. This led to further definition of the associated factors and the development of a model (See Figure 1.)

It was originally proposed that the necessary and sufficient conditions for a dual-career couple to decide to have a child after planned postponement of childbearing included (a) pressure from the wife's biological time clock, (b) having attained a certain level of education or career status, (c) having achieved adequate financial security, (d) having a stable marriage, (e) having resolved sex-role identity issues, and (f) having fulfilled or resolved family injunctions about birthtiming.

### Conclusions

Subsequent interviews with other dual-career couples led to a modification of the model (See Figure 2). The important

change was to separate occupational identity issues from sex-role identity and individuation issues and in fact to place this factor in a space by itself. This new model illustrated the need for there to be: (a) pressure from the wife's biological time clock, (b) attainment of a certain educational level or career status, (c) attainment of adequate financial security, (d) establishment of an occupational identity, (e) a stable marriage, and (f) resolution of sex-role and individuation issues before, and (g) fulfillment or resolution of family injunctions regarding birthtiming.

An assumption had been made that dual-career couples in which the wife had chosen to develop her career and to postpone childbearing would probably score very "modern" on the Sex-role Preference Scale, but this did not hold true. Only 11 (73%) of the wives scored "modern" on the SRPS compared with 7, (47%) of the husbands. Nine (60%) of the couples were in agreement in their sex-role preference attitudes. There was further indication from the transcripts that some of the subjects might have scored more "modern" on the SRPS before becoming parents. Therefore, should we assume that dual-career couples are "modern" especially if they are parents?

Of considerable influence in the decision-making was the effect of peer pressure both in terms of previously supporting a childless lifestyle and then in making a positive decision to have a child as more of their cohort

group became parents. The "off time" theory of Neugarten et al. (1965) appeared applicable to the influence of peers on the decision-making of these 30 dual-career men and women. This may be indicative that the unique sample of dual-career couples studied had established their own "parenthood age norms." It appears that late birthtiming has reflected the "norm" of these dual-career couples, first with a norm to maintain a "childless life style." Then as their cohorts proceed to have children, the norm changes, and a couple might feel "off time" if they remain childless and thus feel pressure to make an affirmative decision to try to have a child.

This study suggests that there is still a predominant existence of childbearing norms and strong reinforcing societal sanctions to have a child if one is married. The reference group support of childless cohorts appears to be a salient factor which encourages a norm for postponement of childbearing which then shifts to a norm which encourages the role of parenthood as more of their childless peers become parents themselves.

#### Implications for Future Research

American society is changing in ways that will probably influence more women to postpone childbearing. Married women no longer retire from the workforce when they marry and begin childbearing. The majority of women expect to work until retirement age with only brief interruptions for



childbirth. This shift is partly dictated by the increasing economic necessity of two family incomes and partly by the increasing social acceptance of work and a career as an acceptable option for married women or mothers.

Among these changes are higher levels of education, particularly for women, better opportunities in the labor force, changing sexual and childbearing norms, and changing attitudes toward marriage and the family. The changes are related to each other and to decisions about fertility. Neither the exact relationships nor the fertility decision-making processes are clearly understood.

The findings of this study make a contribution to a unique understanding of these processes which evolved from the qualitative research methodology employed. However, the participants in this research were from a small area of America. Future research should include an expanded sample of couples both dual-career and dual earner representative of the whole country.

This sample of postponed childbearers were highly educated professional women and men. Although it is true that half of the married women in the United States who had a first birth in 1980 at age 30 years or more held a professional job in the year before the birth, more than one-third (36%) were sales, clerical, or service workers. Four percent were in other types of jobs and nine percent were unemployed at the time of the birth (Baldwin & Nord, 1984). Future research should include couples in the sample

in which the wife was age 30 years or more at the time of her first birth who were employed in nonprofessional occupations representative of these figures.

Is there a difference between this group of "later" parents who did not delay marriage but did delay childbearing and the "later" parents who have delayed marriage until a child is planned? Could it be that these "marriage postponers" must meet the same conditions implied by this research before they decide to have a child and then marry?

The implications of delayed parenthood are yet to be studied. Will the children of parents who postponed childbearing be raised differently from children whose parents followed a more traditional pattern? What are the stresses of "older" parenthood? Are there areas of less stress for "older" parents such as in the financial area because having delayed childbearing might enable the couple to be better established economically than younger parents? Is the early childhood period or the adolescent period more stressful for parents who had their first child when they were 30 and even 40 years of age?

Is there a difference in how older parents raise their firstborn children because they are at a different developmental stage? Are older fathers, for example, more involved in a nurturing childcare role than younger fathers who might be more involved in establishing their careers? Do "later parents" have higher aspirations for their

children? Is there pressure on the infants of "older parents" to become "super babies"?

What is the divorce rate among "later childbearers"?

If divorce rates are lower, does that mean that marital satisfaction is higher? No research has looked at this issue.

Will the health industry be affected by the increasing trend of "older parenthood"? The potential for an increase in Down's syndrome and other chromosomal birth defects is considerable (Waite & Stolenberg, 1976). Will the health industry be able to meet the increased demand for prenatal diagnostic techniques created by these "later childbearers"? These questions remain to be answered in future research.

The small sample size of this study make it difficult to generalize the results. However, there is a dearth of information about factors influencing the decision of dual-career couples who have postponed childbearing to proceed with starting their families at a later age. Even though this study cannot assume to make generalizations to all the late birthtiming dual-career couples, it can help to build a base of knowledge to assist the couples themselves or professionals working with dual-career couples who are contemplating a late birthtiming decision.

## BIBLIOGRAPHY

## BIBLIOGRAPHY

- Bane, M. (1976). Here to stay: American families in the twentieth century. New York: Basic Books.
- Barton, A. & Lazerfeld, P. (1975). Qualitative data as sources of hypotheses. In G. McCall and J. Simmon (Eds.), Issues in participant observation. Reading, Ma.: Addison-Wesley.
- Baldwin, W. & Nord, C. (1984). Delayed childbearing in the U.S.: Facts and fiction. Population Bulletin, 39, 4-43.
- Beach, L., Campbell, F. & Towner, B. (1979). Subjective expected utility and the prediction of birth planning decision. Organizational behavior and human performance, 24, 18-28.
- Becker, H. (1963). Outsider: studies in the sociology of deviance. New York: Free Press.
- Becker, H. & Geer, B. (1969). Participant observation: The analysis of qualitative field data. In G. McCall and J. Simmons (Eds.), Issues in participant observation. Reading, Ma.: Addison-Wesley.
- Becker, H., Geer, B., & Hughes, E. (1968). Making the grade: The academic side of college life. New York: Wiley.
- Beckman, L. (1978a). Couples' decision-making processes regarding fertility. In K. Taeuber, L. Bumpass & J. Sweet (Eds.), Social-demography. New York: Academic Press.
- Beckman, L. (1978b). The relative rewards and cost of parenthood and employment for employed women. Psychology of Women Quarterly, 2, 215-234.
- Beckman, L. (1979). Fertility preference and social exchange theory. Journal of Applied Social Psychology, 9, 147-167.
- Blake, J. (1979). Is zero preferred? American attitudes toward childlessness in the 1970's. Journal of Marriage and the Family, 26, 245-256.

- Bogan, R. & Taylor, A. (1975). Introduction to qualitative research methods: A phenomenological approach to the social services. New York: Wiley.
- Bowen, G. (1981). Sex role preferences and marital quality in the Air Force. Unpublished doctoral dissertation: University of North Carolina at Greensboro.
- Bowen, M. (1978). Toward the differentiation of self from one's family of origin. In Family therapy in clinical practice. New York: Jason Aronson.
- Bram, S. (1978). Through the looking glass: Voluntary childlessness. A mirror of contemporary changes in the meaning of parenthood. In W. Miller & L. Newman (Eds.), The first child and family formation. Chapel Hill, North Carolina: Carolina Population Center.
- Broderick, C. (1971). Beyond the five conceptual frameworks: A decade of development in family theory. Journal of Marriage and the Family, 33, 139-159.
- Bronowski, J. (1975). The ascent of man: Sources and interpretation. Boston: Little Brown.
- Bulmer, M. (1974). Some neglected problems of sociological research. British Journal of Sociology, 25, 244-251.
- Burr, W., Leigh, G., Day, R., & Constantine, J. (1975). Symbolic interaction and the family. In W. Burr, R. Hill, F. Nye & I. Reiss (Eds.), Contemporary theories about the family, (vol. 2.). New York: The Free Press.
- Butz, W. & Ward, M. (1977). The emergence of countercyclical U.S. fertility. (R-1605) National Institute of Health. Santa Monica: The Rand Corporation. (Mimeograph)
- Campbell, D. (1957). Factors relevant to the validity of experiments in social settings. Psychological Bulletin, 4, 299-311.
- Campbell, D. & Stanley, J. (1966). Experimental and quasi-experimental designs for research. Chicago: Rand McNally.
- Chafetz, J. (1980). Feminism and newly emerging norms concerning motherhood. SWS Network, 5, p.8.
- Constantinople, A. (1969). An Eriksonian measure of personality development of college students. Developmental psychology, 1, 387-392.

- Cook, T. & Campbell, D. (1979). Quasi-experimental design and analysis: Issues for field settings. Chicago: Rand McNally.
- Cressey, D. (1953). Other people's money: A study in the social psychology of embezzlement. New York: Free Press.
- Daniels, P. & Weingarten, I. (1979). A new look at the medical risks of late childbearing. Women and Health, Spring, 4, 4-36.
- Davidson, A. & Jaccard, J. (1975). Population psychology: A new look at an old problem. Journal of Personality and Social Psychology, 31, 1073-1082.
- Davitz, L. (1981, November). Baby Hunger. McCalls, 10-13.
- DeJong, G. & Sell, R. (1977). Changes in childlessness in the United States: A demographic path analysis. Population Studies, 31, 129-141.
- Deutsch, H. (1945). The psychology of women: Vol. 2. Motherhood. New York: Grune & Stratton.
- Duncan, O. (1961). A socioeconomic index of occupations. In A. Rossi, (Ed.), A socioeconomic index for all occupations. Glencoe, Il.: The Free Press.
- Epstein, C. (1971). Law partners and marital partners: Strains and solutions in the dual family enterprise. Human Relations, 24, 549-564.
- Erikson, E. (1959). Identity and the life cycle. In Psychological issues, Vol. 1, New York: International University Press.
- Erikson, E. (1963). Childhood and society. (2nd ed.). New York: Norton.
- Fabe, M. & Wikler, N. (1979). Up against the clock: Career women speak on the choice to have children. New York: Random House.
- Fawcett, J. (1978). The value and cost of the first child. In W. Miller & L. Newman (Eds.), The first child and family formation. Chapel Hill, N.C.: Carolina Population Center.
- Fishbein, M. (1972). Toward an understanding of family planning behavior. Journal of Applied Social Psychology, 2, 214-227.

- Franke, L. (1980). A baby after 30. Newsweek, 1, p. 96.
- Fried, E. & Udry, J. (1980). Normative pressures on fertility planning. Population and Environment, 3, 199-209.
- Freud, S. (1905). Three essays on the theory of sexuality (Vol. 7). London: Hogarth Press.
- Fuchs, F. (1980). Genetic amniocentesis. Scientific American, 242, p. 6.
- Gelles, R. (1982). Applying research on family violence to clinical practice. Journal of Marriage and the Family, 44, 9-21.
- Gerson, M. (1980). The myth of motherhood. Psychology of Women Quarterly, 5, 207-217.
- Gilligan, C. (1982). In a different voice. Cambridge, Massachusetts: Harvard University Press.
- Glaser, B. & Strauss, A. (1967). Discovery of substantive theory. In W. Filstead (Ed.), Qualitative methodology. Chicago: Markham Publishing Company.
- Goode, W. (1960). A theory of role strain. American Sociological Review, 25, 488-496.
- Handy, C. (1978). Going against the grain: Working couples and greedy occupations. In R. Rapoport & R. N. N. Rapoport (Eds.), Working couples. New York: Harper & Row.
- Hodgson, J. & Fischer, J. (1979). Sex differences in identity and intimacy development of college and youth. Journal of Youth and Adolescence, 8, 37-50.
- Hoffman, L. (1978). The effects of the first child on the woman's role. In W. Miller & L. Newman (Eds.), The first child and family formation. Chapel Hill, N.C.: Carolina Population Center.
- Hoffman, L. & Hoffman, M. (1973). The value of children to parents. In J. Fawcett (Ed.), Psychological perspectives on population. New York: Basic Books.
- Holmstrom, L. (1972). The two career family. Cambridge, Ma.: Schenkeman.
- Houseknecht, S. (1979). Timing of the decision to remain voluntarily childless: Evidence of continuous socialization. Psychology of Women Quarterly, 4, 81-96.



- Houseknecht, S. (1980). Childlessness and marital adjustment. Journal of Marriage and the Family, 41, 259-265.
- Johnson, J. (1975). Doing field research. New York: Free Press.
- Jung, K. (1959). Basic writings. New York: Modern Library.
- Kidder, L. (1981). Qualitative research and quasi-experimental frameworks. In M. Brewer & B. Collins (Eds.), Scientific inquiry and the social sciences. San Francisco: Jossey-Bass.
- Kleinman, Scherryl (1980). Learning the ropes in field work analysis. In W. Shaffir, R. Stebbins & A. Turowitz (Eds.), Fieldwork experience: Qualitative approach to social research. New York: St. Martin's Press.
- LaRossa, R. (1977). Conflict and power in marriage: Expecting the first child. Beverly Hills, Ca.: Sage Publications.
- LaRossa, R. & LaRossa, M. (1981). Transition to parenthood: How infants change families. Beverly Hills, Ca. Sage Publications.
- Laucks, E. (1981). The meaning of children. Boulder, Co.: Westview Press.
- Levinson, D. (1978). The seasons of a man's life. New York: Knopf.
- Lindesmith, C. (1978). Addiction and opiates. Chicago: Aldine.
- Lofland, J. (1971). Analyzing social situations. Belmont, Ca.: Wadsworth.
- Lofland, J. (1978). Introduction: The qualitative strategy approach to interaction in everyday life. In J. Lofland (Ed.), Interaction in everyday life. Beverly Hills, Ca.: Sage Publications.
- Lord, L. (1978, February 20). Delayed baby boom: Its meaning. U.S. News and World Report, 39-41.
- McCall, G. & Simmons, J. (Eds.) (1969). Issues in participant observation. Reading, Ma.: Addison-Wesley.
- McCleary, R. (1978). Dangerous men: The sociology of parole. Beverly Hills, Ca: Sage Publications.

- McDonald, G. (1978). A reconsideration of the concept: Sex-role identification in adolescent and family research. Adolescence, 13, 215-220.
- Marciano, T. (1978). Male influence on fertility: Needs for research. The Family Coordinator, 20, 561-568.
- Nadelson, C. & Nadelson, T. (1980). Dual career marriages: Benefits and costs. In F. Pepitone-Rockwell (Ed.), Dual career couples. Beverly Hills, Ca.: Sage Publications.
- National Institute of Health (NIH) (1979). Antenatal diagnosis. Report of a consensus development conference sponsored by the National Institute of Child Health Organizations. Bethesda, Md.
- Neugarten, B. (1979). Time, age and the life cycle. American Journal of Psychiatry, 136, 887-896.
- Neugarten, B., Moore, J., & Lowe, J. (1965). Age norms, age constraints, and adult socialization. American Journal of Sociology, 70, 22-28.
- Orlofsky, J., Marcia, J., & Lesser, I. (1973). Ego identity states and the intimacy vs. isolation crisis of young adulthood. Journal of Personality and Social Psychology, 27, 211-219.
- Ory, M. (1978). The decision to parent or not: Normative and structural components. Journal of Marriage and the Family, 40, 531-534.
- Paloma, M. (1972). Role conflict and the married professional woman. In C. Safilios-Rotschild (Ed.), Toward a sociology of women. Lexington, Ma.: Xerox.
- Phillibar, F. (1980). Socialization for childbearing. Journal of Social Issues, 36, 30-44.
- Pebley, A. (1981). Changing attitudes toward the timing of first births. Family Planning Perspective, 13, 171-175.
- Pitts, J. (1964). The structural functional approach. In H. Christenson (Ed.), Handbook of marriage and the family. Chicago, Il.: Rand McNally.
- Poston, D. & Gotard, E. (1977). Trends in childlessness in the United States, 1910-1975. Social Biology, 24, 212-224.
- Publication manual of the American Psychological Association (3rd. ed.). (1983). 3rd. ed. Washington, D.C.: American Psychological Association.

- Rallings, E. & Nye, F. (1979). Wife-mother employment. In W. Burr, R. Hill, F. Nye, & I. Reiss (Eds.), Contemporary Theories About the Family. New York: Free Press.
- Rapoport, R. & Rapoport, R. N. (1971). Dual career families. Hammondsworth, England: Penguin Books.
- Rapoport, R. & Rapoport, R.N. (1980). Three generations of dual career family research. In F. Pepitone-Rockwell (Ed.), Dual career couples. Beverly Hills, Ca.: Sage Publications.
- Rindfuss, R. & Bumpass, L. (1978). Age and the sociology of fertility: How old is too old? In K. Taeuber, L. Bumpass, & J. Sweet (Eds.), Social demography. New York: Academic Press.
- Rindfuss, R. Bumpass, L. & St. John, C. (1980). Education and fertility: Implications for the roles women occupy. American Sociological Review, 45, 431-447.
- Robinson, W. (1969). The logical structure of analytic induction. In G. McCall & J. Simmons (Eds.), Issues in participant observation. Reading, Ma.: Addison Wesley.
- Rogers, C. (1980). Delayed motherhood: The career hypothesis. Presented at the annual meeting of Population Association of America, Denver, Co.
- Rosen, B. Jardee, T. & Prestwick, T. (1975). Dual career marital adjustment: Potential effects of discriminatory managerial attitudes. Journal of Marriage and the Family, 37, 565-572.
- Rossi, A. (1980). Life span theories and women's lives. Signs, 6, 4-32.
- Sanguliano, I. (1978). In her time. New York: Morrow Quill.
- Scanzoni, J. (1975). Sex role, life styles, and childbearing: Changing patterns in marriage and the family. New York: The Free Press.
- Scanzoni, J. (1979). Social exchange and behavioral interdependence. In T. Huston & R. Burgess (Eds.), Social exchange and developing relationships. New York: Academic Press.
- Schwartz, H. & Jacobs, J. (1979). Qualitative sociology. New York: The Free Press.

- Shaffir, W., Stebbins, R., & Turowetz, A. (Eds.). (1980). Fieldwork experience. In Qualitative approach to social research. New York: St. Martin's Press.
- Sklar, J. & Berkov, B. (1975). The American birth rate: Evidence of a coming rise. Science, 189, 693-700.
- Smetena, J. & Adler, N. (1978). Decision making regarding abortion: A value expectancy analysis. Journal of Population, 1, 338-357.
- Steiner, C. (1974). Scripts people live. New York: Grove Press.
- Stewart, A. (1977). A psychosocial study of the formation of the early adult life structure in women. Unpublished doctoral dissertation, Columbia University.
- Stewart, A. (1980). Perspectives and situations in the prediction of women's life patterns. Psychology of Women's Quarterly, 5, 195-205.
- Stolzenberg, R. & Waite, L. (1977). Age, fertility expectations and plans for employment. American Sociological Review, 42, 769-783.
- Stryker, S. (1967). Identity salience and role performance: The relevance of symbolic interaction theory for family research. Journal of Marriage and the Family, 30, 558-564.
- Thibaut, J. & Kelly, H. (1959). The social psychology of groups. New York: Wiley.
- Tomeh, A. (1978). Sex-role orientation. An analysis of structural and attitudinal predictions. Journal of Marriage and the Family, 40, 341-354.
- Towner, B., Beach, L., Campbell, F., & Martin, D. (1977). Birth planning, values and decisions: The prediction of fertility. Journal of Applied Social Psychology, 9, 73-88.
- Turner, R. (1969). The quest for universals in sociological research. In G. McCall & J. Simmons (Eds.), Issues in participant observation. Reading, Ma.: Addison Wesley.
- U.S. Bureau of the Census. (1978, June). Fertility of American women. Current Population Reports. (Series 20, No. 341). Washington, D.C.: U.S. Government Printing Office.

- U.S. Bureau of the Census. (1981, March). Fertility of American women. Current Population Reports. (Series 20, no. 367). Washington, D.C.: U.S. Government Printing Office.
- U.S. National Center for Health Statistics (1981). Births, marriages, divorces and deaths for 1980. Monthly Vital Statistics Report (Vol. 29, no. 12). U.S. Government Printing Office.
- U.S. National Center for Health Statistics. (1981b). Births, marriages, divorces and deaths for February, 1981. Monthly Vital Statistics Report ( Vol. 30, no. 2). Washington, D.C.: U.S. Government Printing Office.
- Veevers, J. (1977). Voluntary childless wives: An exploratory study. Sociology and Social Research, 57, 356-365.
- Veevers, J. (1980). Childless by choice. Toronto: Butterworths.
- Waite, L. (1981). U.S. women at work. Population Bulletin, 36, 9.
- Waite, L. & Stolenberg, R. (1976). Childbearing and labor force participation. American Sociological Review, 41, 235-352.
- Weidger, P. (1976). Menstruation and menopause. New York: Alfred A. Knoff, Inc.
- Weingarten, K. & Daniels, P. (1982). Sooner or later: The timing of parenthood in adult lives. New York: Norton.
- Wilkie, J. (1981). The trend toward delayed parenthood. Journal of Marriage and the Family, 45, 3.
- Wolf, W. & Rosenfeld, R. (1978). Sex structures of occupation and job mobility. Social Forces, 56, 823-844.
- Znaneicki, F. (1934). The method of sociology. New York: Holt, Rinehart & Winston.

## APPENDIX A

### Study Description Sent to Participants

FAMILY RESEARCH CENTER  
Department of Child Development and Family Relations  
University of North Carolina  
Greensboro, N.C. 27412

In reference to our telephone conversation, I want to tell you about the research project on childbirth decisions. I am a psychotherapist in private practice and a researcher in the doctoral program in Child Development and Family Relations at the University of North Carolina at Greensboro.

In the last ten years, many women in America have had the opportunity to pursue professional and business careers which have required higher education and long term commitment. Many of these career women and their husbands postponed childbearing while they were both establishing themselves in their careers. Increasingly, these dual career couples are having their first child when the wife is 30 years and older. We know little about the factors influencing their decision to have a child at that time. Therefore, the focus of this research study is to understand how the couples made the decision to have their first child after postponing parenthood.

Participation in the study would involve an unstructured conversation with both of you in your home for about an hour or so. In order to keep track of the information discussed, our conversation would be tape recorded. At the conclusion of our discussion, a brief questionnaire would be filled out separately by both the wife and husband. All information would be coded by number to ensure your confidentiality and anonymity. I am committed as a researcher to the requirements of the ethical standards of the University of North Carolina at Greensboro.

I will be calling in about a week to inquire if you have decided to participate in the study, and if so, to set up an appointment for me to come to your home at your convenience. If after the interview you decide not to participate, you may withdraw from the study and may keep all the notes and tape of our conversation.

At the conclusion of the study, couples who have participated will receive a written description of the findings. I would also be available to discuss the results in person, should you desire it. If you have any questions, please call me at (919) 942-6673.

Sincerely,

Maxine Soloway, ACSW  
603 Morgan Creek Road  
Chapel Hill, N.C. 27514  
942-6673



APPENDIX B  
Questionnaire

## CONFIDENTIAL QUESTIONNAIRE

After our discussion together about your decision to have a child, please take a few minutes to complete this questionnaire. There are no right or wrong answers. Feel free to answer as truthfully as you can. These answers will not be shared with your spouse and will remain confidential. Some of the questions are going to be different from those discussed in our interview, but there may be some overlap.

Please answer each question by putting a circle around the number that best fits what you want to say or by filling in the blank space. If the meaning of a word or instructions are not clear, please ask me to explain.

1. Are you:
 

MALE        0

(or)

FEMALE     1
2. On what month, day, and year were you born?
 

Day          Month        Year

What are the birth dates of your parents?

Father	Mother
<u>      </u>	<u>      </u>
Day, Mon., Yr.	Day, Mon., Yr.
3. Have you ever been married before?
 

YES        0    (CONTINUE)

NO         1    (SKIP TO Q. 5)
4. How many times?
 

(Number)
5. On what month, day, and year did your (present) marriage begin?
 

Month        Day        Year
6. How far did you go in school--what was the highest grade or level of school you completed?
 

<p>At present--</p> <p style="margin-left: 40px;"><u>                    </u></p> <p style="margin-left: 40px;">Highest Grade</p>	<p>At the time you decided to have a child--</p> <p style="margin-left: 40px;"><u>                    </u></p> <p style="margin-left: 40px;">Highest Grade</p>
---	--
7. Do you currently have a regular paying job?
 

YES        0    (CONTINUE)

NO         1    (SKIP TO Q. 11)

8. What kind of work do you do? What are the main things you do on your job?

8. A. When did you start the job you now hold--what month and year?

MONTH      YEAR

8. B. What job, if any did you hold when you decided to have a child?

8. C. Did your mother have a job or career when you were growing up? If so, what did she do? Indicate whether she worked full or part time.

9. A. Here are a list of yearly incomes different people have. Please circle the letter of your own individual income at the time of the birth of your first child. Please give the gross figure before taxes.

- |                     |                    |
|---------------------|--------------------|
| a. less than 14,999 | h. 45,000-49,999   |
| b. 15,000-19,000    | i. 50,000-54,999   |
| c. 20,000-24,999    | j. 55,000-59,999   |
| d. 25,000-29,999    | k. 60,000-64,999   |
| e. 30,000-34,999    | l. 65,000 and over |
| f. 35,000-39,999    |                    |
| g. 40,000-44,999    |                    |

9. B. Did your combined income at the time of your first child enable you to continue to live the same lifestyle and maintain the same standard living that you had achieved prior to becoming a parent?

YES      0

NO      1

10. Please circle whether you strongly agree, agree, have mixed feelings, disagree, or strongly disagree about each of the following statements as they apply to a mother.

	Strongly Agree	Agree	Mixed Feelings	Disagree	Strongly Disagree
a. A mother should realize that her greatest rewards and satisfaction in life come through her children.	0	1	2	3	4
b. A mother of preschool children should work only if the family really needs the money a whole lot.	0	1	2	3	4
c. A working mother should give up her job whenever it makes a hardship for her children.	0	1	2	3	4
d. There should be more day care centers and nursery schools so that more mothers of preschool children could work.	0	1	2	3	4
e. If being a mother isn't satisfying enough, she should take a job.	0	1	2	3	4
f. A mother of preschool children shouldn't work because it isn't good for the child.	0	1	2	3	4
g. A mother with pre-schoolers should be able to work as many hours per week as their father.	0	1	2	3	4
h. A marriage is incomplete without children.	0	1	2	3	4

11. Please circle whether you strongly agree, agree, have mixed feelings, disagree, or strongly disagree about each of the following statements as they apply to a wife.

	Strongly Agree	Agree	Mixed Feelings	Disagree	Strongly Disagree
a. A married woman's most important task in life should be taking care of her spouse and children.	0	1	2	3	4
b. She should give up her job if it inconveniences her husband and children.	0	1	2	3	4
c. She should not have equal authority with her husband in making decisions.	0	1	2	3	4
d. If she works, she should not try to get ahead in the same way a man does.	0	1	2	3	4
e. Having a job herself should be just as important as encouraging her husband in his job.	0	1	2	3	4

12. Please circle whether you strongly agree, agree, have mixed feelings, disagree, or strongly disagree about each of the following statements as they apply to a father.

	Strongly Agree	Agree	Mixed Feelings	Disagree	Strongly Disagree
a. The father should be the <u>main</u> financial support of his children.	0	1	2	3	4
b. The father should spend as much time as the mother in looking after the <u>daily</u> needs of his children.	0	1	2	3	4
c. The father should be the children's main disciplinarian.	0	1	2	3	4
d. The father has the <u>special</u> responsibility to discipline the children firmly.	0	1	2	3	4
e. The father has a special responsibility to set an example to his children of leadership and assertiveness.	0	1	2	3	4
f. If a child gets sick and his wife works, the father should be just as willing to stay home from work and take care of the child.	0	1	2	3	4
g. If his wife works, he should share equally in household chores such as cooking, cleaning, etc.	0	1	2	3	4

13. Please circle whether you strongly agree, have mixed feelings, disagree, or strongly disagree about each of the following statements as they apply to a husband.

	Strongly Agree	Agree	Mixed Feelings	Disagree	Strongly Disagree
a. If her job sometimes requires her to be away from home overnight, this should not bother him.	0	1	2	3	4
b. If his wife makes more money than he does, this should not bother him.	0	1	2	3	4
c. If his wife works, she should share equally in household chores such as cooking, cleaning, and washing.	0	1	2	3	4
d. A married man's chief responsibility should be his job.	0	1	2	3	4
e. The husband should be the head of the family.	0	1	2	3	4



APPENDIX C  
Interviewing Probes

## Indirect and Direct Probes for Hypothesized Variables

### 1. Biological Time Clock

Indirect: "Do you think the passing years influenced your decision to have a child now?"

Direct: "Did you feel you were running out of time in which you could have your own child?"

### 2. Childbearing Injunctions

Indirect: "Do you think there were any things from your childhood which might have influenced your decision to have a child when you did?"

Direct: "Did your mother or father ever say anything directly or indirectly about their views about having children or the timing of childbearing?"

### 3. Financial Security and Continuation of Establishing Lifestyle

Indirect: "Many couples have become accustomed to a certain way of life and standard of living that having a child might change."

Direct: "Where things you felt were important or essential to have before you wanted to become a parent? Did you have to return to work in order to maintain your lifestyle after your child was born?"

### 4. Role Identity Issues

Indirect: "Do you think there were things about yourself that influenced your decision to postpone childbearing?"

Direct: "Were there things you felt you wanted to accomplish or work out for yourself before becoming a parent?" "What were some of those things?"

### 5. Marital Commitment

Indirect: "Many couples tell us that they liked having some time after their marriage to work things out between them."

Direct: "Did you feel your marriage was solid enough to bring a child into it?"

6. Career Status or Educational Goal Attainment

Indirect: "Where were you in relation to your career  
(Educational Goal) when you decided to proceed  
with having your first child?"

Direct: "Had you completed your education (or established  
yourself in your career) at the time you decided  
to have a child?"

## APPENDIX D

### Summary of Sample Characteristics

Summary Table of Sample Characteristics

ID#	Couple	Age	Length of Marriage	Education	Income	Occupation	SRPS
1	H	34	13 yrs.	MSW	25,000-29,000	Biostatistician	M
	W	34		PhD	24,999	Social Worker	M
2	H	35	5 yrs.	MSW	15,000-19,999	Social Worker	T
	W	30		MSW	15,000-19,999	S.W. Professor	M
3	H	31	2 yrs.	MD	15,000-19,999	Physician	M
	W	30		JD	20,000-24,999	Lawyer	M
4	H	36	9 yrs.	ABD	20,000-24,999	Psychologist	M
	W	32		MA	14,000	Former Teacher	M
5	H	37	5 yrs.	PhD	25,000-29,999	Professor	T
	W	32		MA	20,000-24,999	IBM Software Div.	T
6	H	42	5 yrs.	JD	15,000-19,999	Lawyer	T
	W	35		MA	35,000-39,999	TV Journalist	M
7	H	39	13 yrs.	PhD	25,000-29,999	Biochemist	T
	W	32		PhD		Psychologist	M
8	H	35	3.5 yrs.	BA	25,000-29,999	Accountant	T
	W	35		BA	20,000-24,999	Accountant	M
9	H	35	8 yrs.	PhD	20,000-24,999	Psychologist	T
	W	35		PhD	14,000	Psychologist	T
10	H	32	4 yrs.	BA and Seminary	25,000-29,999	Clergyman	M
	W	32		MD	20,000-24,999	Physician	M
11	H	40	6 yrs.	PhD	25,000-29,999	Professor	T
	W	37		PhD	20,000-24,999	Social Science Research	M
12	H	34	5 yrs.	JD	15,000-19,000	Lawyer	M
	W	32		JD	14,000	Lawyer (Part-time)	M
13	H	35	6 yrs.	MBA	30,000-34,999	Banker	M
	W	35		MBA	30,000-34,999	Stock Broker	T
14	H	37	8.5 yrs.	Jr.Coll.	20,000-24,999	TV Advertising	M
	W	32		Jr.Coll.	20,000-24,999	Office Manager	M
15	H	36	2.5 yrs.	BA	15,000-19,999	Stock Broker	T
	W	35		MA	15,000-19,999	Teacher	T

## APPENDIX E

Antecedent Factors Associated with Late Birthtiming  
Coded by Two Raters

## Antecedent Factors Associated With Late Birthtiming

Rater 1

Couple ID#		Time Clk.	Occup. ID.	Sex Role ID.	Educ/ Career	Finan. Sec.	Mar. Com.	Fam. Inj.	Peer Infl.	Etern. Issue
1	H	1	1	1	1	1	1	1(I)		--
	W	1	1	1	1	1	1	1(E)	-	2
2	H	2	1	2	1	2	1	1(I)	2	1
	W	1	1	1	1	2	2	1(E)	1+	2
3	H	2	1	1	1	2	1	1(I)	--	2
	W	2	1	3	1	2	1	1(I)	--	--
4	H	1	1	1	1	1	1	1(E)	1	--
	W	1	1	2	1	1	1	1(I)	--	--
5	H	2	2	2	2	1	2	1(I)	--	--
	W	2	1	2	1	1	2	1(I)	--	--
6	H	1	1	1	1	1	1	1(I)	2	2
	W	1	1	1	1	1	1	(I)	2	1
7	H	1	1	4	4	4	--	1(I)	--	--
	W	1	2	2	2	2	--	1(I)	1-	--
8	H	2	2	2	2	2	--	1(I)	--	1
	W	1	2	1	1	1	--	1(I)	--	1
9	H	2	1	1	1	1	--	1(I)	--	--
	W	1	1	1	1	1	--	1(I)	--	1
10	H	1	2	3	1	1	1	1(I)	--	1
	W	2	2	1	1	1	1	1(I)	--	1
11	H	2	2	3	2	1	--	--	--	--
	W	1	2	1	1	1	1	--	--	--
12	H	2	2	3	2	2	--	1(I)	1+	1
	W	1	1	1	1	2	2	1(I)	1+	--
13	H	2	1	2	1	1	2	--	1+	--
	W	2	1	2	1	1	2	1(E)	1+	--
14	H	2	2	1	1	1	2	1(I)	--	2
	W	2	2	1	1	1	2	1(I)	--	2
15	H	2	1	1	1	3	--	--	1+	--
	W	1	2	2	2	1	--	--	--	--

## Coding Key

- 1 was an issue which had to be resolved before pregnancy attempted
- 2 was not an issue. Didn't have any bearing on the timing of the decision to try to have a child
- 3 was an unresolved issue which was resolved with the birth of the child
- 4 was an issue and remains an unresolved issue
- was not mentioned
- + positive influence
- negative influence

## Antecedent Factors Associated With Late Birthtiming

Rater 2

Couple ID#		Time Clk.	Occup. ID.	Sex Role ID.	Educ/ Career	Finan. Sec.	Mar. Com.	Fam. Inj.	Peer Infl.	Etern. Issue
1	H	1	1	--	1	1	2	1(I)	-and+	--
	W	1	2	1	1	1	2	1(E)	-	2
2	H	2	1	2	1	1	2	1(I)	--	1
	W	1	1	1	1	1	2	1(E)	1+	2
3	H	2	1	1	1	2	1	1(I)	--	2
	W	2	1	3	1	2	2	1(I)	--	--
4	H	2	1	1	1	1	--	1(E)	1	1
	W	1	1	2	1	+	--	1(I)	--	--
5	H	2	2	2	1	1	2	1(I)	1-	--
	W	2	1	2	1	1	2	1(I)	1-	--
6	H	1	1	2	1	1	1	1(I)	--	--
	W	1	1	2	1	2	1	(I)	--	1
7	H	1	1	2	4	2	--	1(I)	--	--
	W	1	2	2	1	2	--	1(I)	1-	--
8	H	2	2	2	1	1	2	1(I)	--	1
	W	1	2	1	1	1	1	1(I)	--	1
9	H	2	1	1	1	1	--	--	1-	--
	W	1	1	2	2	1	--	--	1-	--
10	H	1	1	1	1	1	--	--	--	1
	W	2	1	2	1	1	1	1(I)	--	1
11	H	2	1	2	2	1	2	1(I)	--	--
	W	1	1	2	1	1	2	--	--	--
12	H	1	1	2	2	2	1	--	+	--
	W	1	1	1	1	2	1	--	+	--
13	H	2	2	1	2	1	2	1(E)	--	--
	W	2	2	1	2	1	2	1(E)	+	--
14	H	1	1	2	1	1	2	--	--	--
	W	1	1	2	1	1	2	1(I)	--	--
15	H	2	1	2	1	1	2	--	+	--
	W	1	4	2	2	2	2	--	--	--

## Coding Key

- 1 was an issue which had to be resolved before pregnancy attempted
- 2 was not an issue. Didn't have any bearing on the timing of the decision to try to have a child
- 3 was an unresolved issue which was resolved with the birth of the child
- 4 was an issue and remains an unresolved issue
- was not mentioned
- + positive influence
- negative influence